

October 20, 2009



TRANSCRIPT
October 20, 2009

MONTGOMERY COUNTY COUNCIL

PRESENT

Council President Phil Andrews

Council Vice President Roger Berliner

Councilmember Marc Elrich

Councilmember Nancy Floreen

Councilmember Duchy Trachtenberg

Councilmember Valerie Ervin

Councilmember Mike Knapp

Councilmember George Leventhal

Councilmember Nancy Navarro

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1 COUNCIL PRESIDENT ANDREWS:

2 Good morning, everybody, and welcome to a session of the County Council. Glad to see
3 you, and we have many items on the agenda for this morning and a long public hearing
4 this evening on the White Flint Sector Plan. So, we're going to begin. We're going to begin
5 the morning with an invocation by Reverend Carrie Yearick of the Rockville Presbyterian
6 Church. Reverend Yearick, thank you for joining us.

7
8 REVEREND YEARICK:

9 Thank you. It's a pleasure to be here. Let us pray. Great and gracious God, there are so
10 many things for which to be thankful: for the beauty of this day, for the crisp autumnal
11 morning, for the way that we can gather together to talk about matters that are important
12 to us, for the people standing beside us, for their insights, their wisdom, their participation,
13 we give you thanks. We pray today, O God, for our leaders here. Guide them, give them
14 wisdom. Give them discernment so that they can make wise choices for the greater good
15 of this county. Keep in their hearts burning their sense of their call to public service so that
16 they may do first things first and so that they can envision for us a better future, a future
17 filled with hope and respect and love for neighbor. For this we pray today. Amen.

18
19 COUNCIL PRESIDENT ANDREWS:

20 Thank you, Reverend Yearick. I want to begin the morning with an announcement
21 regarding a tax credit program that--the state of Maryland has a program that some are
22 familiar with and many aren't-- that gives a credit against a homeowner's property tax bill if
23 the property taxes exceed a fixed percentage of the household income. So, in other
24 words, it sets a limit on the amount of property tax any homeowner must pay based on his
25 or her income. Montgomery County offers two supplemental tax credit programs. And our
26 residents can apply for all 3 programs with one application. The tax credit programs
27 available are the Maryland Homeowners' Property Tax Credit Program, the Montgomery
28 County Supplemental Property Tax Credit and Montgomery County Senior Property Tax
29 Credit, which is for eligible homeowners over the age of 70. The original deadline to apply
30 had been September 1, but it's been extended to Monday, November 2. To get an
31 application, you should call the Maryland State Department of Assessments and Taxation,
32 also known as SDAT, at 1-800-944-7403. Again, that number to get an application to see

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1 if you're eligible for these various tax credits is 1-800-944-7403. We're now going to
2 reverse the order slightly on the presentations. We're gonna begin with the third
3 presentation, which is a proclamation in recognition of October as Disability Employment
4 Awareness Month. I am going to ask the members of the Health and Human Services
5 Committee to join me if they would like at the front for this presentation. And I'd like to ask
6 the folks that are here today for the presentation in the audience-- Sharon Freeman and
7 the other representatives of the disability community and commission to join us up front.
8 And want to note that Montgomery County strives to be a very inclusive community. Good
9 morning. Nice to see you. Ms. Freeman, nice to see you. OK.

10
11 [Freeman speaking indistinctly]
12

13 COUNCIL PRESIDENT ANDREWS:

14 All right. Mark Nacsin????? Seth Morgan. John Myers.????? OK. Well, first, thank you for
15 the good work that you do on behalf of the disability community. Montgomery County is
16 striving to become a community that employs best practices in matters affecting people
17 with disabilities, including employment, which is a huge issue because about 80% of
18 people with disabilities are underemployed or unemployed. That's a terrible number that
19 we need to do better with. Perhaps we're doing a little bit better on that area in the county
20 but not substantially, I suspect. So, it's an area we need to work on. There are a number
21 of initiatives before the Council. For the Health and Human Services Committee, I'm
22 joined by the Chair of the Health and Human Services Committee, George Leventhal and
23 his colleagues who are on the committee and my colleagues, Duchy Trachtenberg and
24 Nancy Navarro. Our Office of Legislative Oversight produced a report about a year and a
25 half ago that laid out some options on making Montgomery County a best practices county
26 with regard to employing people with disabilities. And the Council and County Executive
27 are both very committed and working through those recommendations now. So, on behalf
28 of the Council, I want to present a proclamation to you, and then I'll ask you to say a few
29 words. "Whereas people with disabilities are an important, vital part of American society
30 as valued workers, civic leaders, business owners, veterans, family members, and friends,
31 and have representation among the protected classes of race, color, religious creed, sex,
32 ancestry, national origin, age, marital status, genetic status, gender identity, familial

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1 status, sexual orientation, and disability, and whereas the Americans With Disabilities Act
2 gives Americans the right to fully participate in all aspects of society and community
3 leaders from small business, industry, labor, and government have long recognized and
4 called for a diverse and capable work force by designating October as National Disability
5 Employment Awareness Month. And Montgomery County, through the efforts of the
6 Department of Health and Human Services, Office of Human Resources, Department of
7 Economic Development, and the Commission on People With Disabilities, join in the
8 recognition. And whereas people with disabilities and their family members, employers,
9 educators, and caregivers have access to trusted, reliable resources and information so
10 that people with disabilities may obtain employment, education, transportation, and
11 housing. And whereas this year we recognize disability.gov, the web site relaunched this
12 past year on the anniversary of the Americans With Disabilities Act by the U.S.
13 Department of Labor for offering comprehensive disability-related resources and
14 information for Americans with disabilities, their family members, veterans, employers,
15 educators, caregivers, and many others. Now therefore do we, Isiah Leggett as County
16 Executive--" and as I've mentioned, the County Executive is very committed to this effort
17 as well -- "and myself as County Council President hereby proclaim the month of October
18 2009 as Disability Employment Awareness Month and October 20, 2009 as disability.gov
19 day in Montgomery County. We encourage all employers and residents to observe this
20 month with appropriate programs and activities and to affirm our commitment to the
21 Americans With Disabilities Act and ensure equal opportunity, full community participation,
22 and economic self-sufficiency for all." Signed this 20th day of October by the County
23 Executive Isiah Leggett and myself as Council President. Thank you for the good work
24 that you're doing. I'd like to present this to you on behalf of the Council. Good work.

25
26 SHARON FREEMAN:
27 Thank you very much.

28
29 COUNCIL PRESIDENT ANDREWS:
30 Well...

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1 SHARON FREEMAN:

2 We'd like to thank the Council. We look forward to working with the Council. We have
3 many initiatives planned, particularly in the area of employment. We hope that some of
4 these initiatives can come to fruition. We thank you for your interest and appreciate the
5 proclamation.

6
7 COUNCIL PRESIDENT ANDREWS:

8 All right. Well, thank you very much. Thank you all. I think now the toughest part of this is
9 getting in the same picture in one screen. So...

10
11 NEIL GREENBERGER:

12 Hop right in there.

Deleted: MAN

13
14 WOMAN:

15 Looking Good.

16
17 [Man speaking indistinctly]

18
19 NEIL GREENBERGER:

20 That's good. Thank you.

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21
22 [People speaking indistinctly]

23
24 COUNCIL PRESIDENT ANDREWS:

25 All right. I should have asked my colleagues who were up here already to stay, 'cause I'm
26 gonna ask the entire Council now to come up to accept a presentation from United States
27 Special Education. We have the president of the organization here, Mr. Tom Jones, who
28 has been working very tirelessly over a number of years on special education issues. I
29 had the good fortune recently to attend an event that was sponsored by a number of
30 organizations including the United States Special Education in honor of Blair Ewing, our
31 late colleague who served on the school board for 22 years and who served here on the
32 Council for 4 and did as much as anyone to advance public education in Montgomery

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1 County and had a particular concern about serving all kids, making sure that we didn't
2 leave any kids behind. I believe the school system just renamed the Mark Twain school
3 for Mr. Ewing. And we thank them for recognizing him. I wanted to ask Mr. Jones to say a
4 few words about the event and Blair Ewing.

5
6 TOM JONES:

7 Thank you, Mr. President. Members of the Council, other members of the Council and
8 staff, colleagues, and friends. It really is good. Thank you from the heart. We can all join
9 together to honor the life and legacy of Blair Ewing-- as Phil has said, the former president
10 of this board and former member of this Council. In all Blair's decades of public service--
11 the Human Relations Council, Montgomery Council, the Board of Education, which was
12 indicated -- the County Council, the State Board of Education where he served at the time
13 of his death -- he always focused on issues of import to the most vulnerable, to those who
14 were the poor, those affected by injustice, those with the most needs. And up till his final
15 days, even his final hours of life, he was a leader for the disabled. He led the way in many,
16 many instances for special education. He inspired countless many others of us to do the
17 same. So, this year on September 13, which is now an annual "All Kids Count" family
18 picnic for all who care about special education, the decision was made from about the
19 dozen special education groups that sponsored that with enthusiasm and gratitude that
20 we would use this year to pay tribute to Blair Ewing and to his care for the needs of
21 special education. So, in consultation with Blair's family, 5 key groups were identified that
22 were really key groups in the life of Blair: The Montgomery County Council, the Board of
23 Education, The NAACP--the State Board of Education, the Montgomery County Council of
24 PTAs. And the leaders of all of those groups gathered that day to honor Blair. And your
25 esteemed president was there. He did us honor by being there, he did you honor, but he
26 mostly honored the life and legacy of Blair by what he said, and we're appreciative of that.
27 With consultation of Blair's family, the special education groups identified two legacies for
28 special education for which Blair was giving leadership right to the time of his death. We
29 all have committed that we will continue to carry out and live out those legacies. We urge
30 you to be a part of that. We think that you are. The first legacy is that all of us are
31 committed to providing a full continuum of services to meet the need of each special kid.
32 The second is to ensure fair and appropriate testing for all special kids. We're all

6

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1 committed to that. We introduced a statement at that tribute which is a one-pager, in
2 which all of the groups-- and to this day, every single individual in every single group has
3 assented to it--has agreed to it. And we hope to embed this statement in everything we do
4 in terms of strategy and planning and vision and the like. And I'll leave a copy with you
5 before I get out of here today. But after the V.I.P.s spoke, we introduced Blair's widow,
6 and she spoke with passion and inspiration and strength and urged all of us to continue
7 these legacies that have been identified to continue the influence of Blair on us. So, we
8 presented a plaque to Marty, and then we said we're going to present a plaque to each
9 one of these 5 key groups. We're going to monitor to be sure that that plaque gets hung
10 where it can be seen. The press will be by to make sure it's there. But to remind us all that
11 we do have a commitment to continue this legacy. So, it's my honor on behalf of all of
12 these groups to present this plaque "In celebration and commemoration of the life and
13 legacy of Blair Ewing, 1934-2009, with commitment to continue his legacy, especially
14 pertaining to special education. Served on the Montgomery County Human Relations
15 Council, 1975- 1976, the Montgomery County Board of Education, 1976-1998, the
16 Montgomery County Council, 1998-2002, and the Maryland State Board of Education,
17 2007- 2009. Blair Ewing graciously represented and worked to make a difference in the
18 lives of the poor, the disadvantaged, and the vulnerable and spoke for those who did not
19 or could not speak for themselves. May his legacy, especially pertaining to special
20 education, continue through the Montgomery County Council. Adopted September 13,
21 2009 by a special gathering of all who care about special education." [Speaking
22 indistinctly]

23
24 COUNCIL PRESIDENT ANDREWS:

25 ...say on behalf of the Council, I'm very honored to accept this. It will have a prominent
26 place here at the County Council and will...

27
28 NEIL GREENBERGER:

29 Good. Thank you.
30
31
32

Deleted: MAN



1 COUNCIL PRESIDENT ANDREWS:

2 Our final presentation this morning is to recognize a true superstar in the fire and rescue
3 [indistinct]. I have with me Council Vice President Berliner, Councilmember Elrich, my
4 colleagues on the Public Safety committee. I want to invite Chief James Seavey and Eric
5 Bernard, the Executive Director of the Montgomery County Volunteer Fire and Rescue
6 Association; Marcine Goodloe, the President of the MCVFRA; Chief Richard Bowers of
7 our fire service; Chief Alan Hinde to join me up here, and this is--congratulations. All right.
8 We have a wonderful fire and rescue service that is comprised of career and volunteer
9 members. They do amazing work on behalf of our residents. One of our chiefs of our
10 volunteer fire department, Chief Seavey, just received some very impressive national
11 recognition as the volunteer fire chief of the year, selected by "Fire Chief" magazine. I will
12 read this proclamation, because it really does summarize some of this gentleman's
13 amazing work on behalf of the community over the past 3 or 4 decades. And, so, Chief,
14 please, come on up. "James P. Seavey, Sr., Chief of the Cabin John Park Volunteer Fire
15 Department and board member on the National Volunteer Fire Council has been named
16 the National Volunteer Fire Chief of the Year by "Fire Chief" magazine. Whereas Chief
17 Seavey's desire to join the fire service began while he was still in preschool and he joined-
18 -" he did, all right. "He joined his local fire department as a junior member as soon as he
19 turned the minimum age of 16. And whereas Chief Seavey has served as firefighter, as
20 chief and everything in between, and he has served in many different types of
21 departments, from city to suburban to rural to federal and is currently serving as a career
22 firefighter in Washington, D.C., in addition to his duties in Bethesda. And whereas, Jim
23 Seavey became Chief of the Cabin John Park Volunteer Fire Department in 1992 and is
24 now the longest serving fire chief in the department's history. And whereas during his
25 tenure as chief, Chief Seavey has demonstrated outstanding leadership skills tested
26 during several major disasters. He effectively led his department through the aftermath of
27 the September 11, 2001 terrorist attacks, administering the staff and operations of the
28 department, while his apparatus responded to the Pentagon. When a tidal surge in
29 Baltimore Harbor during Hurricane Isabel hit residences in 2005, Chief Seavey was part of
30 the team that saved 269 people. And in December 2008, he served as branch
31 commander during rescue operations after a major water main break left motorists
32 stranded in fast-moving, rising water on River Road in our county. And whereas the

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1 Volunteer Fire Chief of the Year Award sponsored by Pierce Manufacturing?????
2 annually honors a volunteer fire chief who has demonstrated outstanding leadership,
3 innovation, dedication, professional development, integrity, service to the public, and
4 contributions to the fire service as a whole--" Can you take this?

5
6 CHIEF JAMES SEAVEY:
7 It's a little too much.

8
9 COUNCIL PRESIDENT ANDREWS:
10 "Now, therefore, be it resolved that the County Council of Montgomery County, Maryland,
11 hereby offers congratulations to Volunteer Fire chief of the Year, Chief James P. Seavey,
12 Sr., and joins with his friends and colleagues in honoring him for his outstanding
13 contributions to the people of Montgomery County and throughout the state and country."
14 Signed this 20th day of October, year 2009 by myself as Council President. Thank you,
15 Chief Seavey.

16
17 CHIEF JAMES SEAVEY:
18 Thank you very much. Appreciate it. Thank you so much.

19
20 COUNCIL PRESIDENT ANDREWS:
21 You got it. And would you like to say a few words?

22
23 CHIEF JAMES SEAVEY:
24 Very simply put, it has been an absolute joy to grow up in this county. And I think when
25 the volunteer service or what you do in your volunteer vocation leads you to your full-time
26 career, it certainly behooves you to return the favor and continue serving the community
27 that gave you what you had to serve in my career in Washington, D.C. So, it's been a
28 tremendous honor, but this is really a reflection on the members of Cabin John and the
29 Montgomery County Fire and Rescue Service. We have a fire service in this county that's
30 second to none. Thank you.

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1 COUNCIL PRESIDENT ANDREWS:
2 Thank you. Thank you very much.
3 The Chief of our fire service, Richard Bowers.
4
5 CHIEF RICHARD BOWERS:
6 I could not echo any better what our Council President said and certainly what Chief
7 Seavey said other than we're fortunate, very, very fortunate to have the dedication and the
8 leadership of Chief Seavey and many other volunteers here in the county. But the one
9 thing that I will say that separates Chief Seavey from a lot of career and volunteer
10 personnel is simply that he has the passion to serve. For that, I thank you, Jim.
11
12 CHIEF JAMES SEAVEY:
13 Thank you.
14
15 COUNCIL PRESIDENT ANDREWS:
16 And I'm also going to ask Marcine Goodloe, who's the President of the Montgomery
17 County Volunteer Fire and Rescue Association if she would like to say a few words.
18
19 MARCINE GOODLOE:
20 Thank you. We indeed are very proud of Jim Seavey. And what the Council President
21 read is just a few things that he's doing. He's very involved on the state and the federal
22 level, as well. We appreciate our outstanding Fire Chief Bowers. We appreciate each and
23 every member that serves in Montgomery County's Fire and Rescue Service. Thank you.
24
25 COUNCIL PRESIDENT ANDREWS:
26 Thank you. All right, we are now going to go on to general business, which is Item 1, and
27 that would be announcement agenda and calendar changes. Miss Lauer.
28
29 LINDA LAUER:
30 The only addition for today is at 1:00. We have a proposed closed session, and that is for
31 a proposal for a business or industrial organization to locate, expand, or remain in the

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1 state. The topic is economic development assistance to 2 specific companies. That's it.
2 Thank you.
3
4 COUNCIL PRESIDENT ANDREWS:
5 OK. Thank you. There are no petitions received this week. And now next action is item C,
6 approval of the minutes of October 6, 2009. Is there a motion?
7
8 COUNCIL VICE PRESIDENT BERLINER:
9 So moved.
10
11 COUNCIL PRESIDENT ANDREWS:
12 Moved by Council Vice President Berliner. Seconded by Councilmember Leventhal. All
13 right, and--
14
15 COUNCILMEMBER ERVIN:
16 Before we vote, I'm just gonna disclose that I am on the Jewish Federation for Group
17 Homes, so I'll be abstaining on Item 2J.
18
19 COUNCIL PRESIDENT ANDREWS:
20 OK, on the consent calendar. OK. That's fine. We'll make a note. That's fine.
21
22 COUNCILMEMBER ERVIN:
23 Now you know.
24
25 COUNCIL PRESIDENT ANDREWS:
26 All right. We've got it. We've been given a heads-up. All right, very good. So, I think we're
27 ready for a vote, then, on the approval of the minutes of October 6, 2009. All those in
28 favor, please raise your hand. That is unanimous, 9-0. We're now moving to the consent
29 calendar as our motion for approval.
30
31 COUNCILMEMBER KNAPP:
32 So moved.

11

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1 COUNCILMEMBER FLOREEN:

2 Second.

3
4 COUNCIL PRESIDENT ANDREWS:

5 Approved by Councilmember Knapp and seconded by Councilmember Floreen. We heard
6 Miss Ervin would be abstaining on Item J, and were there any other comments on the
7 consent calendar? I see Councilmember Knapp.

8
9 COUNCILMEMBER KNAPP:

10 Thank you, Mr. President. Just a brief comment on Item C, the Water Quality Working
11 Group. I thanked the Council for their efforts last week in authorizing this. Through the
12 efforts and conversation with your staffs and with folks in the community and with Park
13 and Planning, and with the Executive Branch, we've put forward a list. Everyone now has
14 a copy of that. I think we've got a good list of folks who are going to participate to actually
15 make sure that we have good science to make decisions in the coming spring as to the
16 best way to protect the Ten Mile Creek watershed. A number of perspectives, and one I
17 would just add is, in addition to what you see here, Rich Thomas????, who is a
18 residential home energy consultant and also is a property owner in Clarksburg. So, just to
19 make sure that that is clear. But everybody else, I appreciate their willingness to serve
20 and your input to put this list together, and look forward to coming back in the next 4
21 months or so with some strong recommendations.

22
23 COUNCIL PRESIDENT ANDREWS:

24 Thank you, Councilmember Knapp. Councilmember Leventhal.

25
26 COUNCILMEMBER LEVENTHAL:

27 I just would appreciate it if staff would include--when the MFP committee takes up this
28 local government debt policy, an explanation of the legislative history of why the state
29 wanted local governments to adopt policies like these. The policy itself seems
30 noncontroversial and generally consistent with what we all understand our policies are.
31 Once you commit things into writing, though, you sometimes end up boxing yourself in or
32 regretting it later. So, I understand that we're mandated to do this under state law. And



1 perhaps at a later time, I could just have access to a memo that explains why the state felt
2 this was an important thing to do.

3
4 COUNCIL PRESIDENT ANDREWS:

5 Mm-hmm. Good point. OK. So noted. I'll make just a couple brief comments. I want to
6 note that we're confirming the appointment of a number of individuals to various boards
7 and commissions. We're very fortunate to have so many people in our county who are
8 willing to give of their time and talents to serve on our boards and commissions. And
9 today, we are confirming account executive appointments to the Animal Matters Hearing
10 Board. Those individuals are Robin Siegel and Lynn Novelli. To the Cable Compliance
11 Commission, those members would be Clare De Cleene, Arthur Jackson, Howard Lane,
12 Martin Ma, and Gregory Maydan. To the Committee on Hate/Violence, Rhona Bosin,
13 Naeemah McDuffey, Dawinder (Dave) Sidhu. To the Ethics Commission, Nina Weisbroth
14 and Stuart Rick. To the Friendship Heights Transportation Management District Advisory
15 Committee, Christine Norris. To the Library Board, Arthur Brodsky, Richard Bryant, Gillian
16 (Jill) Lewis, Otto Lewis, and Frank Ricardi. To the Mid-County Citizens Advisory Board,
17 Richard Newman. To the Pedestrian and Traffic Safety Advisory Committee, Lt. James
18 Humphries, and Ramin Assa. To the Silver Spring Transportation Management District
19 Advisory Committee, G. Michael Price, Edward Furgol, Martin Atkinson IV, Rukiyat Gilbert,
20 and Everton Latty. And thank all those individuals for their willingness to serve and give us
21 their best advice as we work to make this an even better county. Councilmember
22 Trachtenberg is next.

23
24 COUNCILMEMBER TRACHTENBERG:

25 Thank you, President Andrews. I just wanted to respond to the request that was posed by
26 Councilmember Leventhal as might be noted before the body. There is a discussion
27 scheduled on October 26 for the debt policy within the MFP committee. And Dr. Orlin, as
28 you might know--George is handling that portfolio. So, I'll certainly make sure that well in
29 advance of that discussion you get a memo-- the entire council, actually, gets it--which
30 outlines the evolution of the policy and why it was implemented on the state level.

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1 COUNCIL PRESIDENT ANDREWS:

2 Very good. Council Vice President Berliner.

3
4 COUNCIL VICE PRESIDENT BERLINER:

5 Just a brief word with respect to Item 2E, which was a matter that we took up in
6 committee--was it yesterday, Madam Chair?

7
8 COUNCILMEMBER FLOREEN:

9 It was indeed.

10
11 COUNCIL VICE PRESIDENT BERLINER:

12 It was indeed yesterday. It was all that long ago, which will for the first time have the
13 county selling its electricity that's generated from its trash facility on peak times. There is a
14 great difference between the value of electricity sold during peak times versus nonpeak
15 times. And this program has the potential to generate something on the order of \$400,000
16 more than we're getting today. So, it's a good thing.

17
18 COUNCIL PRESIDENT ANDREWS:

19 Very good point. Thank you for the information about that item. I don't see any other
20 comments on the consent calendar, so we're ready to vote on it. All those in favor of the
21 consent calendar, please raise your hand. That is unanimous, 9-0. All right, we're gonna
22 move right into our meeting as the Board of Health, which is one of the functions of the
23 Council. And we're going to, at this meeting, have an update from Dr. Ulder Tillman, our
24 County Health Officer, on H1N1 and Seasonal Flu and perhaps other items, too. We're
25 also, then, going to meet with the Commission on Health. And I believe that the chair of
26 the Commission on Health, Wendy Friar, is with us and has provided us with a copy of
27 their annual report. Very thorough. Thank you for doing that. Thank you for the good work
28 of the commission. So, I'll first invite them both to join us at the table at the front, and we'll
29 begin with Dr. Tillman's update on the flu. And it looks like we have a video presentation
30 online. Good morning, Dr. Tillman. How are you?

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1 DR. ULDER TILLMAN:

2 Good morning.

3

4 COUNCIL PRESIDENT ANDREWS:

5 There you go. And can you move it right in front? There you go.

6

7 DR. ULDER TILLMAN:

8 Good morning, commissioners. I say that as the Board of Health. I have the opportunity
9 this morning to give you an update on what we're doing in Montgomery County and the
10 state with the H1N1 influenza swine flu. OK. What do I do here? OK. The state of
11 Maryland has adopted a response mode with this pandemic in terms of looking at 4 pillars.
12 Number 1 is surveillance. Number 2--community mitigation, what we do to help the
13 community decrease the spread of this disease. Number 3-- the third pillar is vaccination,
14 and number 4 is our communication. And can we advance the next one? Oh, OK, good.
15 All right. We have been contending with H1N1 influenza actually since last March and
16 April of this year. It never went away during the summer as we had hoped. What usually
17 happens with the flu virus once things get warm, it went into our camps and day programs
18 with children, and then we had a resurgence when the children and students returned to
19 school and college. So, at this time, the levels of influenza-like illness continue to rise. It is
20 widespread in the state of Maryland. It is widespread, also, in Montgomery County. It is
21 just about widespread throughout the United States. We have 41 states at this point in
22 time that are reporting widespread disease. And then we have 8 states that report regional
23 disease. And interestingly enough, District of Columbia is only reporting local disease like
24 Puerto Rico and Hawaii. We have had isolated but almost no reports of antiviral
25 resistance. And fortunately, since April, we have not been able to detect any shifts in the
26 genetics or the virulence of this disease. So, it continues to be mild and moderate.
27 Although, as you will see, we have had some deaths to the disease. This is a busy slide,
28 but this is the latest update that we received on Friday from the Centers for Disease
29 Control and Prevention that is essentially restating what I have already said, that the
30 influenza activity has continued to increase across the United States. We now are seeing
31 the rising in hospitalizations related to this disease. And just about all of the influenza that
32 is circulating at this time is H1N1 virus, which will explain the rationale for some other

15

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1 changes that I will mention later as well. There have been thus far 11 influenza-associated
2 pediatric deaths in just the last week alone. We now have, I think, about 86 deaths among
3 children, which is very unusual for this time of year and far exceeds what we had last
4 year. And again, as I said, it's widespread. Part of the surveillance that we are doing
5 includes having health care providers and clinics to enroll as "sentinel providers" so they
6 give us and the state weekly updates in terms of what they are seeing in their practices
7 and their offices. We also have a essence program which we are monitoring the over-the-
8 counter purchases of cold and flu products. We have a system where we are also
9 monitoring what's happening in our schools so that our school nurses are reporting
10 absentee data. They are also reporting, of course, the visits that come into the school
11 health rooms. And since about May of this year, we have been tracking the exclusions of
12 students from our schools. I must tell you that since August, we have had to exclude
13 about 1,900 children from our public school system for flu- like illnesses. Fortunately,
14 about 1,400 of them have now returned to school. But we have been seeing progressive
15 rises every day in our public schools for the number of children who need to be excluded.
16 And actually, we noticed on yesterday that this may be leveling off because we think now
17 that parents and guardians are definitely getting the message that if the children are sick,
18 keep them home and don't send them. Going beyond the pillar of surveillance, we are
19 looking at community mitigation, what we are trying to do to encourage the public, our
20 work places, our schools, and other sites, how to reduce the spread of influenza. We have
21 already encouraged businesses and county government and private organizations to
22 update their continuity of operation plans in anticipation of a reduced work force, to
23 prioritize their essential operations and know how they can adapt with that reduced
24 workforce. We have encouraged and continue to encourage employers to focus on their
25 sick leave policies. What can they do to encourage employees who are sick to stay home,
26 if they are sick or if they need to care for someone sick at school and how to adjust to that.
27 We are still waiting for some final deliberations for county government in terms of what will
28 help our employees take care of themselves and reduce the spread of disease in the
29 workplace as well. And of course, the CDC recommendation continues and the emphasis
30 that if you are sick, please stay home. They have now moderated, and I updated, I guess
31 back on September 24, the Joint Committee of HHS and Education that they have
32 moderated their stance that children should stay out of school only 24 hours after their



1 fever is gone without fever-reducing medication. Just this past week, they have now also
2 updated their recommendations to health care settings, that those staff who have been
3 sick that they should also stay out for 24 hours after the fever is gone. It used to be 7 days
4 from onset of symptoms. They've now moderated that, as well. We will not be in a
5 situation of needing to close schools unless there is a change in the severity of the
6 disease. Fortunately, as I said, it continues to be mild to moderate. It does unpredictably
7 cause death among some who are healthy. And as a matter of fact, we have had 10
8 deaths in the state of Maryland. And that last one was of a healthy child with no underlying
9 illnesses who became seriously ill and died. But it now is the emphasis on excluding
10 people who are not well, excluding sick students from school, but not closing schools.
11 However, if there is a change in severity of the disease or if the numbers of staff and
12 students who are absent impede the normal operation of a school or if we get along with
13 that increased activity of influenza illness, the schools can remain open. I think there was
14 one school in Maryland, a private school, that needed to close because of the level of
15 absenteeism that they had. This is just looking in terms of community mitigation. Some of
16 the things we do for mild or moderate severity versus high severity. As you can see, we
17 are still staying on the mild to moderate severity recommendations in terms of covering
18 your cough when you sneeze or cough, using a tissue and disposing of that or coughing
19 into your sleeve, frequent hand washing, staying home when you're sick, doing routine
20 cleaning of high-touch surfaces. In the schools, when we identify children who are ill, we
21 are separating them from those who are well. We are encouraging our school nurses as
22 necessary to wear personal protective equipment, a mask, while they're caring for these ill
23 students. And we are also encouraging the public to use the anti-viral medication early if it
24 is recommended by a health-care provider. And more recommendations came out just at
25 the end of last week regarding pregnant women and children from the CDC on this. OK.
26 And now, the biggie that we have been emphasizing is vaccination. And we started off
27 with seasonal influenza. We were given strong recommendations from the Centers for
28 Disease Control to encourage as many people as possible to get a seasonal influenza
29 vaccine that could help prevent the mixing or co-mingling of the seasonal influenza with
30 the H1N1 and creating a more serious version of the virus. We were gung-ho in this
31 operation. We were told that there would be plentiful seasonal flu vaccine. We spent a
32 protracted amount of time working with MCPS and fire and police and others in terms of



1 launching a seasonal flu vaccine program in our schools. And we had the goal of reaching
2 32,000 children in our elementary schools with FluMist, the intranasal seasonal flu. It was
3 unfortunate for us that we ran into vaccine shortages. So that we actually had to abort that
4 program probably just a little more than a week after we started it in the schools. We did
5 reach about 9,000 children, but it was frustrating that we had to cancel clinics and notify
6 parents that we could not do it. So there was the vaccine shortage. The other issue that
7 occurred was that the vaccine manufacturers were able to release the H1N1 vaccine
8 approved by the FDA early in October rather than the end of October. And third, because
9 99% of what was circulating in the United States was H1N1, we received a strong
10 recommendation from the Maryland Department of Health and Mental Hygiene to shift,
11 suspend administration of seasonal flu and try to get as much H1N1 vaccine into people
12 as we could. So you have there the priority groups that are greatest at risk for the
13 complications of influenza, H1N1 influenza, and particularly with pregnant women and the
14 complications they had experienced in April as well as the increased deaths. You have
15 children who are under 6 months of age who cannot be vaccinated, so that you try to
16 vaccinate their caregivers and/or household contacts to protect them. Health-care
17 workers, particularly, and emergency response or emergency services need to be
18 vaccinated so that they can be protected and not spread to their patients. Then we have
19 the children and young adults, 6 months to 24 years old, and then people 25 to 64 with
20 underlying medical conditions. So, these were the priority groups that we've been trying to
21 target with vaccine. Then the rest of the population can receive this vaccine when it is
22 more plentiful. We are still estimating that that will be around December that it can be
23 made available to anyone who wants it. It has been determined through the vaccine safety
24 trials that children who are 9 years old and less probably need 2 doses of the vaccine, but
25 that for those 10 and over, there is a very good response, strong response in the trials to
26 mount an immunity to just one dose. So, we're doing that. The H1N1 vaccine is under the
27 direction and the control of the Centers for Disease Control as well as the states. DHMH
28 has preregistered for Montgomery County more than 400 health care providers who can
29 receive the vaccine directly, and they are signing agreements that they will vaccinate at
30 least 100 people. And they will agree that they will focus on the priority groups.
31 Montgomery County Department of Health and Human Services, as a local health
32 department, received its first shipment of H1N1 all- intranasal vaccine on October 6. We



1 quickly mobilized and had a vaccine clinic on that following Friday, October 9. We were
2 able to vaccinate a little more than 500 individuals. Now, the challenge that we have with
3 intranasal vaccine is that it is limited to healthy individuals between the ages of 2 years
4 and 49 years old. They cannot be pregnant. They cannot have any underlying conditions.
5 So, that limits who we can give it to. But we had received about 2,500 doses. And we
6 were able to, in a 3-hour time, to vaccinate 500 individuals. Lots of media attention with
7 that. We then received -- and this was last Wednesday, I believe -- We received on
8 October 14 -- we got a shipment of the injectable vaccine that can be given to all who are
9 eligible to receive it and don't have severe allergies for contraindication to receiving it. We
10 received 1,400 doses. We gave out 1,400 doses. We had an overwhelming response to
11 that clinic. It wrapped around the building and went 2 blocks down to Georgia Avenue
12 from our Dennis Avenue Health Center in terms of the number of people who were
13 anxious to receive this vaccine. Now we have the quandary. We have very little injectable
14 vaccine at this point in time. We received our vaccine last week on a Tuesday and had the
15 clinic on Wednesday. If we do not receive additional injectable vaccine today, then the
16 clinic that we have scheduled for tomorrow at 1335 Piccard will basically be an intranasal
17 flu vaccine administration, which means we'll again be limited to people 2 to 49 years old.
18 I am not looking forward to turning anyone away, but that's what it is licensed for. So that if
19 we don't get more injectable vaccine today, that's gonna be the limitation. And then, even
20 though you have in your packet that we have scheduled weekly clinics here out, it is
21 always going to be dependent on the vaccine shipment that we receive. I just heard this
22 morning -- and I was chagrined to hear it -- that the state of Maryland is looking at
23 receiving only 50% of what they had expected for this month by the end of October. So, I
24 am thankful that we have a number of volunteers, that we have the support of MCPS, of
25 fire and police, of our volunteer center, of volunteer professionals, all of the nurses
26 available in HHS, and many others, including the support of our hospitals who are ready
27 and willing to help us when we can get vaccine to get us through the season. CDC has
28 already said that this was gonna be a rocky start, that this is turning on the tap. It's going
29 slowly now and that it will become a stream and then it will become a river. I can tell you
30 we have an information line that receives calls, and it certainly has an uptick with our
31 residents in anticipation of receiving it. We still have upset parents over the suspension of
32 the seasonal flu campaign in the schools. And they don't understand why can we not do it



1 in the schools. But really, our bottleneck or our barrier is how much vaccine we have
2 available. We thought for the most part it was gonna be staffing, but it really is the
3 limitation of the vaccine. I already explained in terms of what we had hoped to do with
4 seasonal vaccine in the schools. We did get out 900, and 404 doses of FluMist as well as
5 274 doses of injectable into school students. We are able to continue with our Pre-K and
6 Head Start students of getting them vaccinated. We did try to finish them up by October 6
7 with the seasonal flu. We can now give them injectable H1N1. We are targeting them.
8 They're the youngest ones and they tend to be the active spreaders of flu. So, we are
9 trying to get them done. We are also making available to the schools students at the
10 Rocking Horse Road Center on Thursday mornings, 8:30 to 12:30, that students can
11 come and receive vaccine, both seasonal vaccine as well as H1N1 vaccine. We started
12 that last Thursday. We had 259 students who came. We will continue each Thursday
13 morning to continue to try to vaccinate them, but it's a far cry from what we had originally
14 anticipated in doing for them. So, it brings us to, really, our next challenge, which is
15 communication. We realize that this has been a complex message to try to deliver to the
16 public. I will say that in terms of communicating with providers that the state has gotten
17 much better at getting communication out to the providers using an e-mail notification
18 system so that they have received at least 4 communications from the state in terms of
19 what the situation is regarding H1N1. Before the public now we are trying to get across a
20 complicated message that, yes, this is the year to get both H1N1 vaccine because that's a
21 different strain of vaccine from the seasonal. You need both. We will be trying to get out
22 the message that, yes, now please be patient. Try to line up, if you're in the priority group
23 for H1N1. Be patient, because by the end of the year, it will be available to everyone who
24 wants it. It's voluntary. It's not mandatory and it's also free 'cause the Federal government
25 has purchased it and they're sending it out. But in the meantime, what we can really just
26 say to everyone is please take time and plan to get the flu vaccines. Try to do the
27 everyday preventive actions, which is the frequent hand washing, the covering of the
28 mouth and nose when coughing and sneezing, throw away those tissues. Try not to touch
29 your eyes, nose, and mouth, because that is how you get germs from your hands into
30 your body. And also that if you do become sick, stay home. And also, if you are in one of
31 the risk groups of pregnant women, or even if you are elderly and develop flulike
32 symptoms--although we really are not seeing it in those over 65-- if you do, make sure you

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1 contact your health care provider and please take the antiviral drug if it's recommended for
2 you. The unprecedented numbers of young children and adolescents who are dying from
3 this disease warrants that sort of action. So, that's what we really need to continue. We
4 have contact information. We do have a flu information line that we set up in the county.
5 That's 240-777-4200. That line is available from 9:00 to 5:00 every work day. We have
6 information that's updated on the county web site with the latest information and with the
7 dates of our clinics. And we also have a link with the state web site in terms of the latest
8 information. I neglected to mention that we are planning at the end of this month to have
9 seasonal flu community clinics again. Those dates are in your packet. That will depend on
10 what we receive. Hopefully that will come in, because we have 3 clinic dates set up, one
11 of which will be on this Saturday. We also will be administering the H1N1 vaccine to
12 students at 3 of our high schools, and we will have 3 high schools-- 3 dates. They'll be
13 operating simultaneously to get that vaccine out to them. That's really the best that we can
14 do under this current situation. But hopefully we will get through this season with minimal
15 severity and fewer... Well, hopefully less deaths, because it is really the vaccine which is
16 gonna be the mainstay. But I think as you are aware, we are racing against time. H1N1 is
17 here. We don't have the seasonal flu that's circulating right now, but the H1N1 is here.
18 We're trying to get vaccine out as fast as we can. So, I'm available to answer any
19 questions for you.

20
21 COUNCIL PRESIDENT ANDREWS:

22 Thank you, Dr. Tillman, for that update. I don't think we have the slides that you were
23 putting on the screen. So if we could get copies of--

24
25 DR. ULDER TILLMAN:

26 I'll send those to you, yes.

27
28 COUNCIL PRESIDENT ANDREWS:

29 All right, and I'm sure you're going to post them on the web as well, right?

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1 DR. ULDER TILLMAN:
2 The slides are going to change from day to day, so that's why I did not have those posted.
3 But most of the information is on the web site, in terms of what steps to take as well as
4 when the clinic vaccine dates are available.
5
6 COUNCIL PRESIDENT ANDREWS:
7 OK, regarding the seasonal flu campaign that had been initiated in the school system that
8 had to be suspended, you said that 9,000 doses were administered, or 9,000 children
9 received the vaccine. How many were scheduled to receive it?
10
11 DR. ULDER TILLMAN:
12 32,000.
13
14 COUNCIL PRESIDENT ANDREWS:
15 OK. And the main problem there was a shortage of vaccine?
16
17 DR. ULDER TILLMAN:
18 That's correct.
19
20 COUNCIL PRESIDENT ANDREWS:
21 OK. All right. What is the expectation for getting more seasonal flu vaccine?
22
23 DR. ULDER TILLMAN:
24 We have heard from the manufacturers that once they get the H1N1 shipped out, that
25 then they will go back and ship out what they manufactured in terms of seasonal flu. But
26 we really have no promises of when that's going to be.
27
28 COUNCIL PRESIDENT ANDREWS:
29 And the reduction in the number of doses that you refer to in terms of the state of
30 Maryland receiving going down from about 1 million to just over 500,000--is what I heard--
31
32

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1 DR. ULDER TILLMAN:
2 Yes.
3
4 COUNCIL PRESIDENT ANDREWS:
5 Are we talking seasonal flu vaccine there or...
6
7 DR. ULDER TILLMAN:
8 No, that's H1N1.
9
10 COUNCIL PRESIDENT ANDREWS:
11 H1N1, OK. When will that likely be arriving?
12
13 DR. ULDER TILLMAN:
14 That we do not know. The state is ordering vaccine every day. They place it with the
15 central distributor in Tennessee, McKesson, but since it is set up that the vaccine is to
16 ship out directly to the providers, the state health department does not know how much
17 the providers receive, or if they receive it, unless they complain about not receiving it. So,
18 it's a poor tracking system that we have. And for some reason, McKesson--even though
19 they do this every year for seasonal flu--they're apparently not being able to give us the
20 information back in terms of how much did they ship to whom.
21
22 COUNCIL PRESIDENT ANDREWS:
23 Since there is at least a delay in receiving the expected amount of vaccine, it makes it
24 even more important then for people, as you described, to take appropriate preventive
25 measures.
26
27 DR. ULDER TILLMAN:
28 Right. Mm-hmm.
29
30
31
32

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1 COUNCIL PRESIDENT ANDREWS:

2 OK. Thank you. Thank you for your hard work. I know that you've been working extremely
3 hard on this. I'll turn first to the chair of the Health and Human Services committee,
4 Councilmember Leventhal.

5
6 COUNCILMEMBER LEVENTHAL:

7 Yeah, Mr. President, you're absolutely right. Dr. Tillman's staff has been working incredibly
8 hard. I want to just take this opportunity to acknowledge, as we acknowledged when
9 Director Ahluwalia was here, to talk about efforts to cope with the immense demands on
10 our safety net services, the burden on the Health Department and the burden on our call
11 center of coping with public anxiety about H1N1 has been enormous. I just think it's very
12 important that the elected officials who oversee these programs take a moment here on
13 television, and every time you get the opportunity, to thank our rank-and-file...people who
14 are serving the clients, answering the phones, trying to deal with people's anxiety, doing
15 the vaccinations, which in and of itself you got to deal with people's anxiety and fears. And
16 I really do want to emphasize at every opportunity the workload burden and the stress that
17 is being faced by rank-and-file frontline county employees, particularly under your
18 supervision, Dr. Tillman. And you, personally, have been under a great deal of stress. And
19 I was at COG a few days ago. All the health officers in the region are just overwhelmed
20 with keeping track of information on what really is not--and now I sort of want to play the
21 role of trying to reassure people, and maybe you can help me here. This is not today the
22 pandemic that we were afraid of. The number of deaths are not greater than what usually
23 happens annually with the flu. People die of the flu. Sadly, it's true. It's very, very rare to
24 die of flu, but it does occasionally occur, particularly where someone is especially
25 vulnerable or if the flu is not treated or it becomes pneumonia or the condition expands.
26 But each year, sadly, some number of people die from flu. And this year, some number of
27 people have died from flu. But correct me if I'm wrong, to date, H1N1 has not proven more
28 deadly or more risky than the flu generally is. I think it's important that we try to reassure
29 people, in part because there's a lot of confusion and misunderstanding. The other point I
30 want to make, and then I'll ask you for any comments on what I've said, for those of us
31 sitting at this dais and for those of us with whom we communicate most of the day--most
32 of our constituents, most of the people we do business with, most of the people we talk to

24

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1 on the phone -- they're not high-risk people. I was having a conversation the other day
2 about whether I ought to get the H1N1 vaccine myself. I've had the seasonal flu vaccine.
3 And the answer is no. I'm a generally healthy 46-year-old guy and I'm not recommended,
4 and I'm not really entitled to get an H1N1 vaccination. And so, for generally healthy adults,
5 in their 20s, 30s, 40s, 50s, unless they're child care workers, unless they're pregnant,
6 generally they shouldn't get the H1N1 vaccine. And, again, to the extent that we can, I
7 think it's important that we try to reassure people. As you've just shown, with the amount
8 of data and information that you've provided, our health officer, our county government is
9 monitoring this very, very carefully. But this is not an occasion for panic or undue anxiety.
10 We're trying to cope with this year's flu, which happens to be H1N1. So, I've made a long
11 statement. If you have any comments in response, I'd be delighted to hear them. But I
12 really want to thank you. You've done an excellent job under great stress. And especially,
13 your frontline staff are doing just a superb job. Whether they appreciate us for saying so,
14 we do appreciate the stress and the burden that they're facing.

15
16 DR. ULDER TILLMAN:

17 Thank you for the support for the staff. They are working hard. They are working long
18 hours, and I appreciate everything they do. And it's nice to hear County Council affirm that
19 as well. I would say that the flu season is not as severe as it could get, and we are
20 fortunate with that. But I will say that it has started earlier, so it's gonna be a longer flu
21 season. And we've got to survive until about May going at this pace. And we have not
22 seen the regular seasonal flu surfacing as yet. So, at some point we're going to be
23 contending with both H1N1 and seasonal. The difference with H1N1 is that it is affecting
24 the younger population as opposed to the older population. So that ordinarily where you
25 have the teenagers and the children who think, "Ah, it's just a cold and we can ignore it",
26 this is the year that we should probably think twice and make sure that our young youth
27 and children are vaccinated for protection. Because as we have seen in the past week or
28 so, there is no predicting when it becomes serious, when it becomes complicated, when
29 you get the pneumonia, and when you need intensive care. So, that's the part we cannot
30 predict. But as I would concur with you that people do need to use common sense. They
31 need to stay away from sick people. They need to stay home if sick and just to continue to

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1 monitor and use those simple preventive measures. So, that would be it. You made
2 another comment that I've now since forgotten, and I apologize.

3
4 COUNCILMEMBER LEVENTHAL:

5 It's just, I guess, how--this is not the pandemic, not today. And the concern that we've had
6 about this is a more virulent more problematic, more toxic strain, thus far, we haven't seen
7 that. Sadly, as I say, people die every year from the flu, if it's untreated, if it becomes
8 pneumonia. You've emphasized the point that, of course, it's much sadder if a victim is
9 younger, and that's a valid point. But we should try to reassure the public even as we try
10 to instruct and inform the public.

11
12 DR. ULDER TILLMAN:

13 Yes. Now let me just say, though, a pandemic is talking about its geographical distribution
14 and not its severity. It is indeed a pandemic. We do have H1N1 worldwide. So it is that,
15 but it is not a severe pandemic, as we have had, you know, in 1918 with so many deaths.
16 We don't know how many people are gonna suffer with this flu in comparison with
17 seasonal flu. We already know that we've seen more pediatric deaths this year with H1N1
18 than we have seen in the years past with seasonal. So, that is something to be wary
19 about. So, it's not anything to ignore. But I would agree with you that at this point in time
20 there is no need for panic. We need patience at this point.

21
22 COUNCIL PRESIDENT ANDREWS:

23 Thank you, Councilmember Leventhal. All right, Councilmember Knapp is next.

24
25 COUNCILMEMBER KNAPP:

26 Mr. President, I just wanted to make sure I understood what you had indicated and also
27 much of what you discussed was county's access from a public health perspective to
28 doses of vaccines for seasonal flu. The part I want to get a little clarification is do you have
29 some sense as to private providers? I see signs in front of drug stores and other places
30 that you can go pay your \$15 or \$20 and get your flu shot, at least your seasonal flu shot.

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1 DR. ULDER TILLMAN:

2 Mm-hmm.

3

4 COUNCILMEMBER KNAPP:

5 Are you getting a sense as to how that is...the availability that people are seeing there?

6

7 DR. ULDER TILLMAN:

8 There is uneven distribution of seasonal flu vaccine. There are still some pharmacy
9 retailers, who have seasonal flu vaccine. There are still some private providers who have
10 it, but it's sketchy. I've even heard that, I think, some of our hospitals had to stop their
11 seasonal flu vaccine initiatives that they had. So, I do know that throughout the United
12 States, more than 50% of what was manufactured got distributed. So, it did go
13 somewhere. And ordinarily, 80% of vaccinations are done in the private sector. So, I
14 would think that we have a number of private providers who have the seasonal flu. I know
15 in our safety net clinics, they did not receive their shipments, and they're still waiting. So,
16 it's an uneven distribution. Now, in terms of the H1N1, the private providers are now
17 slowly beginning to receive their shipments. I know last week, the hospitals received part
18 of their shipments. So it is beginning to go beyond the public sector. We were told, of
19 course, that by the end of October, that many more would have it. I'm guessing now it's
20 gonna be into November before people are comfortable that they have adequate supplies
21 of the vaccine, and that's H1N1.

22

23 COUNCILMEMBER KNAPP:

24 Right. So, if people wanted to pursue getting a seasonal flu vaccine at this point, they
25 probably have a better shot looking towards the private sector or the couple clinics that we
26 have. Not necessarily that's good, but better potentially than the public sector. Then, for
27 H1N1, something's going to continue to roll out during the course of the rest of the fall, but
28 that would look more--bless you--look more towards the public sector for that initially, or
29 also look for distribution points in the private sector as well as the public sector?

30

31

32

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1 DR. ULDER TILLMAN:

2 We have 400 providers in Montgomery County who are slated to receive H1N1. So, that's
3 gonna be the distribution on the public sector as well as the private. And even our safety
4 net clinics are slated to receive it. It's just a question of when. Then, basically, all I can
5 recommend to the public is they should always call first and find out if it's available and
6 then go. But I dread to see more people standing outside in the cold in a line and then
7 hearing that we're out.

8
9 COUNCILMEMBER KNAPP:

10 Right. And I would just reiterate the comments of the chair of the HHS committee and
11 thank you and your team. This is tough and this is a challenging time. But as you said, it's
12 gonna be a long flu season. And so, hang in there. But thank you very much for your
13 efforts and we appreciate it very much.

14
15 COUNCIL PRESIDENT ANDREWS:

16 Thank you, Councilmember Knapp. Councilmember Navarro.

17
18 COUNCILMEMBER NAVARRO:

19 Thank you. Dr. Tillman, thank you so much for that update. I guess I just wanted to clarify.
20 So, if a parent wants to know where to get the seasonal flu vaccine or the swine flu, they
21 can definitely check out the web site and it would have updates in terms of where we are
22 at this point in distribution in the county, but also, if they go to their pediatrician, what they
23 can expect? Is that correct?

24
25 DR. ULDER TILLMAN:

26 For the H1N1 or seasonal?

27
28 COUNCILMEMBER NAVARRO:

29 I'm just trying to figure out if there is a centralized place. Parents are still confused about
30 where do I go if I want to get seasonal flu shot for my child in addition to swine flu. Do I go
31 to 2 different places? I know you mentioned Rocking Horse. So, is there a centralized



1 place where parents can sort of say, "OK, if I want to go ahead and get my children
2 vaccinated, for both or one, what's the best place? What's the best..."

3
4 DR. ULDER TILLMAN:

5 In terms of our school students, they will be able to check the MCPS web site as well as
6 the county web site in terms of availability. As long as we have vaccine, yes, that Rocking
7 Horse Center every Thursday morning will have vaccine available.

8
9 COUNCILMEMBER NAVARRO:
10 H1N1 or the flu vaccine?

11
12 DR. ULDER TILLMAN:

13 They will actually have both as long as we have it. And then for the H1N1, we have dates
14 set up beginning November--no, beginning Wednesday, October 28, then November 4,
15 and November 11 at the 3 high schools. And that's Northwood High School, Northwest
16 High School, and Rockville High School, between the hours of 4 P.M. to 8 P.M. That is
17 when we're gonna be administering free H1N1 vaccinations to both private and public
18 school students. So, that will be set for them. They can always check with their own
19 pediatrician or family physician to find out if they have supplies. And I think right now, the
20 private sector does not have it, but they are beginning to get it. So, I would say over the
21 next 30 days--

22
23 COUNCILMEMBER NAVARRO:
24 And you indicated that the H1N1 is free, right?

25
26 DR. ULDER TILLMAN:
27 Yes.

28
29 COUNCILMEMBER NAVARRO:
30 Not necessarily the seasonal flu. So if a parent goes to the pediatrician, expect to not pay
31 anything for the H1N1 once it becomes available.



1 DR. ULDER TILLMAN:

2 The Federal government is permitting the private sector to charge an administration fee.
3 So, that may be as high as \$20, but the vaccine itself is free.

4
5 COUNCILMEMBER NAVARRO:

6 And my second question to you in terms of the collaboration with the school system and
7 the protocols, I'll just share a personal story. As I was driving into the session this
8 morning, I get a call from my 17-year-old, who developed chills, et cetera, at school,
9 wanted to go to the nurse, teacher refused to give her a pass. She went anyway. Nurse
10 refused to see her because she didn't have a pass. Calls mom. I say go home. Call my
11 husband, take her to the pediatrician. But I was, you know, I was obviously rather upset at
12 the notion that we are trying so hard to send a message, especially for students to
13 advocate for themselves if they're not feeling well, to make sure that they are checked out,
14 go home, stay away, et cetera. What is the protocol-- I mean, I'm sure that we should ask
15 the school system, but in terms of your interaction, do we need to revisit that conversation
16 about how we're sending a strong message to all the schools, principals, et cetera, to
17 make sure that we are actually accommodating students when they step up and self-
18 identify as not feeling well? Because given the fact that we have this shortage right now,
19 we do have to make sure we focus on prevention. So, I just share that not-very- pleasant
20 experience that I had and having to advocate and just say, "Well, leave without a pass"
21 because you have to make sure that you are checked out and stay home, et cetera. Is
22 there any continuing reinforcement of that message?

23
24 DR. ULDER TILLMAN:

25 Well, we have a joint working committee between HHS and MCPS in terms of the
26 messages that we're sending home and the messages that are going to staff and
27 principals. There have been multiple letters that the principals have in terms of the
28 guidelines. And we are trying to keep our schools open, so therefore we want to
29 emphasize that if there is an ill student, that student needs to be checked out and isolated
30 right away. So, we really do want to emphasize that message as well as the message that
31 we go through every year, that you want to encourage students to wash their hands
32 frequently with soap and water. And please give them the supplies so they can do that.

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1 Part of what you said is something, obviously, that needs to be taken up with MCPS in
2 terms of the specifics. But our nurses are well-trained. They're giving the messages.
3 They've got the posters. And we correspond weekly over these issues. And we want
4 people to stay well. We want the sick to be sent home so they can be cared for. And that
5 is the bottom line message.

6
7 COUNCILMEMBER NAVARRO:

8 Right. And I think that overall, the feedback that I even got from my daughter -- she
9 mentioned something about how on Facebook, all the updates in terms of status are all
10 "sick at home," "sick at home," "sick at home". So, there's a way to track things as well.
11 Let's track the data through Facebook. So, even the students are pretty good at letting
12 each other know via Facebook--"at home," et cetera, "not feeling well," "went to the
13 doctor." And I think there is a sense of wanting to take responsibility.

14
15 DR. ULDER TILLMAN:

16 That's great.

17
18 COUNCILMEMBER NAVARRO:

19 Yeah. Thank you.

20
21 COUNCIL PRESIDENT ANDREWS:

22 Thank you. Councilmember Navarro. And wish your daughter a speedy recovery.
23 Councilmember Trachtenberg.

24
25 COUNCILMEMBER TRACHTENBERG:

26 Thank you, President Andrews. I also want to express my gratitude to Dr. Tillman and all
27 of our HHS employees. Obviously, more work and less resources. We really appreciate
28 the fine effort of everyone in this regard. Actually, just one question, Dr. Tillman. I want to
29 make sure I understand the protocol that actually has been followed by county hospitals in
30 terms of the provision of the H1N1 vaccine. I know that health care workers were
31 considered to be a priority for the immunization. But I'm sort of curious about hospital
32 population. And the reason I'm asking, again, it's because of a personal interaction I had

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1 last week in a state hospital around my son. I think many of you know he's in a state
2 institution. I was told by his treatment team that he was already immunized for the
3 seasonal flu, and that they were still waiting for inventory for H1N1. I'm just trying to get a
4 sense of county hospitals and state hospitals and how they are going to actually allocate
5 what inventory they receive.

6
7 DR. ULDER TILLMAN:

8 Well, I think all across the country, we receive the seasonal flu first. That's what we were
9 doing. And all hospital staff are certainly encouraged to be immunized against seasonal
10 flu. They're also being encouraged to get the H1N1 vaccine as well. There are still a
11 number of hospitals that are waiting for the H1N1 to come in. I heard on a conference call
12 with some of our hospitals that they're planning to vaccinate their staff and those who are
13 in direct care, and then their ICU patients and ER patients when they have available
14 vaccine. There is the challenge that all of the hospitals are dealing with is the amount of
15 vaccine that they have available. And that is what they're trying to balance, who to give it
16 to and when, when they have it. So, I know that that is a struggle still at this point in time
17 for them. When we spoke with the hospitals yesterday, we know that they received only
18 part of what they had requested. So, they do have to play that balance act. But they do
19 want to get out both seasonal as well as H1N1 based on that availability. So, they're doing
20 the best that they can. The hospitals have also had to implement some restrictions in
21 terms of visitors coming into the hospital so that they can minimize that spread of disease
22 to their patients as well. So, at least in Montgomery County, I'm aware that that's what
23 they're doing. I can't speak for other places.

24
25 COUNCILMEMBER TRACHTENBERG:

26 No, I appreciate that and I appreciate the response. And actually one of the scenarios that
27 was provided to me as a suggestion was that I actually, when having my son out on a
28 pass, actually bring him to a private provider, if I can actually locate someone who would
29 actually give him the shot. And I think, actually, that's what I'm likely to do. So, I do thank
30 you for the information again. I thank you and your department personnel for their fine
31 work effort.

32

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its form or content. Please note that errors and/or omissions may have occurred.

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1 DR. ULDER TILLMAN:

2 Thank you for your support.

3
4 COUNCIL PRESIDENT ANDREWS:

5 Thank you, again, Dr. Tillman. And convey our thanks to your staff. We appreciate the
6 update. We will continue to look forward to having updates from you in-between our
7 regular meetings as this progresses. And we thank you for the presentation today. We're
8 now going to go to a meeting with the Commission on Health and ask Wendy Friar, who is
9 the chair of the commission, to present a summary of the commission's work. I wanted to
10 note just two things that stood out to me in the report. One is the continuing disparity with
11 African-American infant mortality, which continues to be strikingly higher than other
12 groups, and also the concern that was expressed by the Mental Health Advisory
13 Committee on the effect of budget cuts on services for dependent vulnerable clients. So,
14 I'd appreciate if you can touch on those two issues, and you may already be planning to.
15 Thank you for the good work you and your other commission members do on the county's
16 behalf.

17
18 WENDY FRIAR:

19 Thank you very much, and good morning, everyone. Our commission collaborates with
20 the county health officer and staff to the Commission on Health to review and comment on
21 gaps, deficiency, duplications in the county's public health programs, services, facilities,
22 proposed allocation of funds, and other health issues affecting Montgomery County
23 residents. Annually, the commission advises the Department of Health and Human
24 Services, the County Executive, and the County Council about public health programs,
25 issues, and planning needs by reporting recommended priorities for action and
26 improvement. The ongoing support of Dr. Tillman, the Montgomery County Health Officer
27 and Chief of Public Health Services; Doreen Kelly, Administrator of Public Health
28 Services; Linda McMillan, County Council Staff Liaison; and Helen Ludlow?????, the
29 Deputy Health Officer; has been essential to the transparent relationship between the
30 county government and Commission on Health. Jeanine Gould-Kostka, staff to the
31 Commission on Health, provides administrative support that is indispensable to the way
32 we function and operate. The commission's comprised of 19 voting members representing

33

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1 consumers and providers of health care. 10 commissioners are consumers, 8 are
2 providers, and 1 representative is from the Montgomery County Medical Society. We're
3 pleased that the membership includes representation in The League of Women Voters
4 and the steering committees of the African-American Health Program, the Asian-American
5 and Latino health initiatives. There are 2 ex-officio nonvoting members, Dr. Tillman and
6 Linda McMillan, and 2 staff members, Doreen Kelly and Jeanine Gould-Kostka. We are
7 also very fortunate to have 12 very engaged commissioners who act as unofficial liaisons
8 to other boards, committees, and commissions. Last year, the Vice Chair, Marcus
9 Piscara????, and I met with each of the liaisons and the chairs and vice chairs of these
10 boards, commissions, and committees. Mr. Piscara and I plan to meet with them again
11 this year. During these meetings, we discuss strategies for collaboration and shared
12 interests. These meetings serve as an excellent opportunity to learn about our mutual
13 missions, visions, goals, and objectives. Our 2009 annual report has been respectfully
14 submitted with the assistance of Mr. Piscara and Miss Gould-Kostka. Some of the Fiscal
15 2009's highlighted are the annual report of the 11 liaisons, which also get into some of the
16 mental health issues that you just mentioned; our work with the Commission on Aging and
17 support of the Community Health Improvement Process, CHIP; guest speakers from the
18 Institute of Medicine covering health disparities; and the American Heart Association
19 discussing obesity in children; and subject matter experts addressing infant mortality and
20 public-private partnerships; Colleen Ryan Smith, epidemiologist from the Department of
21 Health and Human Services, presented data related to programs dealing with infant
22 mortality; and, of course, the testimonies and correspondence for the County Executive
23 and the County Council. This past year, the Commission on Health worked hard to build
24 an infrastructure for Fiscal Year 2010. The specific priorities of 3 standing committees
25 have been carried over from the last year to this year. And the commitment remains
26 strong and intact. We are sure the commission will keep its finger on the pulse of the
27 county and continue to identify and respond to other issues as well. As a demonstration of
28 our commitment last Thursday, we had an annual retreat that was designed to develop
29 workplans for fiscal year 2010. Additionally, all of the commissioners looked ahead in
30 preparation of Fiscal Year 2011 as county budget and policy recommendations for the
31 County Executive and County Council. Thank you for your letter of inspiration and your
32 clear direction in response to our letter describing the work of our 3 committees. For Fiscal

34

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1 2010, the key points that emerge from the retreat are as follows. The public-private
2 partnership's goal is to leverage opportunities with the public and private sectors to
3 improve the health of Montgomery County residents. At the end of this fiscal year, we
4 hope to work with the Department of Health and Human Service leaders to energize the
5 Federal Health Professionals' Care Project; determine the need for health professionals in
6 the Montgomery Cares clinics, and work with the Montgomery County Medical society to
7 address the need for health professionals. The Health Disparities Committee has the goal
8 to reduce health disparities and promote cultural, financial, and geographical access to all
9 Montgomery County residents. At the end of the year we hope to collect and analyze
10 infant mortality data, promote education and awareness about sexually transmitted
11 infections to at-risk populations. And thirdly, the Prevention and Wellness Committee has
12 the goal to promote healthy lifestyles and utilization of physical exercise within the
13 community. We hope by the end of the year to monitor the establishment of an upcounty
14 clinic for sexually transmitted infections, promote healthy lifestyles through increased
15 activity in kindergarten through fifth grade, and promote healthy school lunches at all
16 Montgomery County public schools. These three areas of concern will be addressed
17 throughout the year. The priorities will viewed in terms of needs and resources while
18 remaining cognizant of the economic crisis among vulnerable populations. Thank you for
19 the opportunity to address you in this session as the Council sits as the county board of
20 health. Thank you.

21
22 COUNCIL PRESIDENT ANDREWS:

23 Thank you, Chair Friar, and your fellow commissioners for their diligent work and service
24 on the county's behalf. I'm gonna turn to Councilmember Trachtenberg.

25
26 COUNCILMEMBER TRACHTENBERG:

27 Thank you, President Andrews, and again, I want to thank you, Wendy, for your report this
28 morning, and we've had the pleasure of visiting the commission several times, and have
29 always found it to be a very constructive experience. Lots of great ideas and great energy
30 in the room. I actually have two areas where I wanted to ask some questions about, and
31 one is really around the STD clinic and the potential for a site upcounty. This was an
32 issue, as you know, that came up last year during the budget discussions, and we, I

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1 believe, allocated something like \$100,000 extra so that we could actually hire an
2 additional staffer to try to address the growing needs over at Dennis Avenue. So, I
3 wondered, both Dr. Tillman and Wendy, where are we in terms of that position? Has it had
4 some impact in terms of patient visits and actual follow through? And where are we,
5 specifically, with the idea of developing some type of satellite location upcounty? Have we
6 actually implemented something?

7
8 DR. ULDER TILLMAN:

9 The position has been created and approved. We're in the recruiting process at this point
10 in time for that position. We have space identified upcounty for--

11
12 COUNCILMEMBER TRACHTENBERG:

13 Where is it?

14
15 DR. ULDER TILLMAN:

16 That would be in the Upcounty Regional Services Center, and we are hoping that it would
17 be able to operate one to two days a week. We need other components to be able to
18 launch that clinic so that we have to have the laboratory support, and we've had some
19 cutbacks from the state that have created a barrier in that area.

20
21 COUNCILMEMBER TRACHTENBERG:

22 And actually, that's one of the reasons why I'm asking the question, because we do know
23 that we're going to have less dollars. We already know, and we might even have less than
24 what we already have identified.

25
26 DR. ULDER TILLMAN:

27 And that will be a challenge. But what we are hoping to do is to at least have a new nurse
28 practitioner on board to be trained to be able to start doing at least a day county for
29 additional services. And then we're gonna have to see how our resources unfold in terms
30 of the sustainability of that.



1 COUNCILMEMBER TRACHTENBERG:

2 OK, Well, I appreciate that update. And the second area I just wanted to ask Wendy to
3 talk a little bit about is the Prevention and Wellness Committee's work, specifically around
4 schools, around students. And I know there's been an effort over the years to address the
5 obesity epidemic, and clearly one of the areas that you focused on is delivery, the
6 preparation of school meals. And can you talk a little bit about the work that the
7 commission has done? I've been impressed with it.

8
9 WENDY FRIAR:

10 Thank you very much. Well, the epidemic of obesity in children is a major concern. And
11 we're concerned about the lack of physical exercise during the school day for the
12 kindergarten through fifth graders. So, we hope to provide some suggestions and some
13 guidelines, especially as put forth by the American Heart Association, on what needs we
14 should be meeting for these children in this area. Of course, we're concerned when a kid
15 goes home, they play video games, they may be latchkey child, can't get out. So, we must
16 provide something for them during the day, and we think it will make for a better learning
17 day as well. We will also--have been talking a bit about the school lunches and how they
18 vary from school to school, depending on PTAs and parent involvement, and we think that
19 may be working. PTAs might be a good move to get a voice in schools, and it would be
20 great if we could get more healthier lunches throughout Montgomery County. I heard
21 today that the Institute of Medicine is now looking at actual lunch programs and that a
22 glass of probably diluted juice with fructose is not considered a fruit, that it must be a
23 whole fruit. And better whole grains for our hamburger rolls or whatever they're serving.
24 So, this is cause for concern for us. We are very interested. We have a very strong
25 prevention committee in that we have a physician sitting on it, someone involved in
26 physical exercise, and we'll see what we can do.

27
28 COUNCILMEMBER TRACHTENBERG:

29 Yeah, and I think the outreach with the school board, with the school system is critical in
30 this, and I'm sure that you are going to pursue this as a topic. And I think that would be an
31 important contribution to the county, because clearly there are some ways that we can
32 model good behavior, and one of those ways is by providing nutritious meals to the

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1 children throughout the county that attend our school system. So, thank you again,
2 Wendy, for your report this morning.

3
4 WENDY FRIAR:

5 Especially because it involves breakfast and lunch sometimes, and now even during the
6 summer.

7
8 COUNCILMEMBER TRACHTENBERG:

9 That's right. Right, and we know certainly that a lot of kids receive their best nutrition at
10 the school site as well, that they're not necessarily getting a warm meal until much later in
11 the day.

12
13 WENDY FRIAR:

14 If they are. Thank you.

15
16 COUNCIL PRESIDENT ANDREWS:

17 Thank you, Councilmember Trachtenberg. I've got one question, and it goes to the chart
18 on circle 53, which shows Montgomery County infant mortality by groups. And if you look
19 at the infant mortality rate for Black-- African-American infants, it went down substantially.
20 It was much higher than other groups in the late nineties, then it went down to almost the
21 average--this is circle 53-- for several years or close to it. And now it's back up to where it
22 was in the late nineties, about 3 times the rate, 2 1/2 times to 3 times the rate of other
23 groups, or at least the average of other groups. What do you think is going on?

24
25 DR. ULDER TILLMAN:

26 At first I would say that when it comes to infant mortality, we do have to look at rolling
27 trends because of the small numbers, you know, just one death or one less death can
28 show a lot of swing in the statistics. And these are small numbers. But I would also say
29 that with the diversity that we have in Montgomery County with our increases of
30 continental Africans, as well as our African-American population, that there is a need to
31 have some concerted efforts to target those groups in terms of their prenatal care as well
32 as their health care before they become pregnant, and that's been a challenge, really,



1 across the nation for particular groups. Our resources are limited in the county in terms of
2 what we can do about infant mortality, so it is frustrating, and we actually have an
3 additional grant from the state to try to target this, but we have some barriers just trying to
4 get that contract implemented so it can get underway before the funding runs out. So, this
5 is always an ongoing challenge for us, but I know that the African-American health
6 programs, Smile program has done good work, but it's a small program. It's a limited
7 program. So it's not reaching everyone. And infant mortality among Black women crosses
8 income groups, educational groups, social and economic levels. So it's not simple just to
9 say that it's a problem of the poor or the uninsured. So, it's an ongoing challenge. But I
10 can only say that the fluctuations that we see in the numbers may actually be more related
11 to the smallness of the numbers. But it certainly tells us that the problem has not been
12 solved.

13
14 COUNCIL PRESIDENT ANDREWS:

15 OK. Thank you for the answer, and I know that it continues to be an issue that you're
16 working hard on.

17
18 WENDY FRIAR:

19 And also, as Dr. Tillman just mentioned, sort of the preconception of health in the sense
20 that when you look at women, and this is adolescent girls, as they get prepared for their
21 childbearing years, this is a time to talk about health and wellness. So, that's another thing
22 that needs to be addressed more fully.

23
24 COUNCIL PRESIDENT ANDREWS:

25 Thank you. All right, well, thank you very much for the hard work and good reports. We
26 look forward to continue to benefit from your work and advice, and thank you for being
27 here this morning.

28
29 WENDY FRIAR:

30 And we appreciate all your feedback and input and communication with us as well.

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1 COUNCIL PRESIDENT ANDREWS:

2 You're welcome. Thank you. All right, we're now going to move right into item 4, which is
3 action on Executive Regulation 32-08, Speed Humps. I'm gonna turn to the chair of the
4 T&E committee for their recommendation.

5
6 COUNCILMEMBER FLOREEN:

7 Thank you, Council President. The speed hump issue arose from our work in the road
8 code several years ago, and we directed--asked the County Executive to put into a
9 regulation format policies that have been in place for some years, in terms of working with
10 community requests for approaches to addressing speeding through neighborhoods. So,
11 what you have before us is their list of--really confirming county policy, by and large.
12 There have been modest adjustments in all of that, but the committee did not recommend
13 that it go back to the County Executive for changes. I know that we had a forum on the
14 issue of speeding devices recently, and I know comments were made with respect to this
15 really important community issue, and we--this is not intended to be the only tool in the
16 toolbox for addressing this. I know speed cameras are always on folks' minds as an
17 additional solution to this issue. The thing about speed humps is there's always gonna be--
18 well, there typically are--there typically is more than one side to the issue within the
19 community, and I know Mr. Berliner wanted to speak to some of the concerns that he has
20 dealt with. So I'll turn it over to him and then if the Council has questions. Mr. Orlin is here
21 for the interesting details.

22
23 COUNCIL VICE PRESIDENT BERLINER:

24 Thank you, Madam Chair, and yes, there certainly is more than--are more than 1, 2, 3
25 sides--

26
27 COUNCILMEMBER FLOREEN:

28 Or possibly 10.

29
30 COUNCIL VICE PRESIDENT BERLINER:

31 But they're-- certainly, speed humps get people's attention, and it got people's attention in
32 my district, and it is a matter that, as you observed, we have not, as a Council, formally



1 reviewed since 1998. So, prior to our taking this matter up before the full Council, I had
2 urged us to give the public an opportunity to weigh in on the issue, and the Council
3 President was kind enough to accommodate that request by combining it with a
4 conversation with respect to speed cameras and other calming devices. And during that
5 public forum, we heard a range of voices, but primarily we heard people who were
6 supportive of this policy, that were supportive of giving greater weight to those who lived
7 on the street itself. It was most effective. And giving less weight to those who live on
8 adjacent streets, particularly those streets that have access to--that can avoid going over
9 the speed humps. It was the voting issue that triggered most of the conversation. There
10 were constituents of mine who felt strongly that we should re-look at the voting issue,
11 particularly the issue of side streets and the extent to which they should be able to vote,
12 and whether or not it should be--whether or not-- whether DOT should have the authority
13 to change the proposal after the vote to make it shorter than that which had been
14 previously proposed. So, we had a situation in my district where speed humps, 3 speed
15 humps were not approved by the requisite number of folks, and that requisite number is
16 80% on the street. So, again, much like we discovered with respect to speed cameras,
17 speed humps are not put in without a great deal of thought beforehand. There are a
18 number of tests that have to be met. There has to be a fair number of cars traveling in
19 excess of a speed limit through a residential neighborhood where the speed limit is 25 to
20 30. If all of those conditions are--those prerequisites are met, then and only then do
21 people vote on the matter, and then you have to have 80% of the people living on the
22 affected street support it, and then 50% of the side street if in fact that side street is
23 landlocked and cannot escape the speed hump. In the situation of Cromwell, they didn't
24 get 80% on the affected road, and the side streets weren't eligible to vote because they
25 could all get--they could all get out of the community without going over the speed hump.
26 So, when Cromwell voted and didn't get the 80%, DOT had the authority in its regs to
27 consider two speed humps and thereby eliminating some of the negative votes that were
28 cast that would no longer be effective because there wouldn't be a speed hump in front of
29 their property as opposed to two speed humps. After all of this, I ultimately concluded that
30 DOT in fact had the authority, properly exercised its authority, and that on balance the
31 County Executive's proposal is a fair one that, for the most part, has eliminated much of
32 the controversy that faced the Council back in 1998. So, I think, on balance, this is an



1 appropriate public policy. The DOT exercised its discretion properly. I should share with
2 my colleagues that DOT no longer is proposing to use the authority on a going forward
3 basis. They eliminate from the regs before us the ability to reduce from 3, if you will,
4 speed humps to 2 speed humps if in fact the vote isn't there to support 3 speed humps,
5 and are now arguing that on a going forward basis they think it's better if there be a re-
6 vote in its entirety. I'm a little confused as to why it was good before, not good now, but I'm
7 OK with your change with respect to that and don't believe that we ought to modify the
8 regulations in order to insist on continuing that policy. So, on balance, I just want to share
9 with my colleagues that as someone who has had to deal with this issue in a very direct
10 way, that I do think it's an appropriate policy.

11
12 COUNCILMEMBER FLOREEN:

13 Well, the devil is indeed in the details, and these details matter to the community. But with
14 that, Mr. President, the committee recommends approval.

15
16 COUNCIL PRESIDENT ANDREWS:

17 Very good. I do not see any other lights, so, we're ready to vote on the approval of the
18 regulation before us. 32-08. All those in favor, please raise your hand. And that is
19 Councilmember Navarro, Councilmember Elrich, Councilmember Trachtenberg,
20 Councilmember Floreen, myself, Council Vice President Berliner, Councilmember Knapp,
21 and Councilmember Leventhal. 8-0. Thank you, Councilmember Floreen. Now we're
22 gonna move on to the FY11 Washington Suburban Sanitary Commission spending control
23 limits, and I'm going to ask our general manager, the general manager for WSSC, who is
24 with us today to join us. We had a chance to have lunch with him 3 weeks, 4 weeks ago,
25 and learned a lot from that, and look forward to working with him. We have the chair of the
26 WSSC with us as well. Our well-known colleague Gene Counihan. So, good to see you
27 both, and I'll turn to Councilmember Floreen for the committee's recommendations
28 regarding this issue.

29
30 COUNCILMEMBER FLOREEN:

31 Thank you very much, Mr. President. What I wanted to emphasize about this
32 determination, this is a part of a process that the counties had agreed to some years ago,



1 which is that they would try to set an upper limit on the budget deliberations that WSSC
2 would enter into, in terms of identifying what the range, the really drop-dead limit of
3 possible rate increases could conceivably be that the Council would support. This is the
4 beginning of a conversation that will conclude in May when we meet with our colleagues
5 in Prince George's and agree or disagree on our support of the WSSC budget. The
6 committee met yesterday. At the last minute, actually, we received the County Executive's
7 recommendations on what the WSSC limits might be, and I'm not sure if the
8 Councilmembers all got the addendum in the packet, which shows our recommendation,
9 which is to support what the County Executive had recommended, which would be that
10 the ultimate limit here would be a maximum average rate increase of 9.9%, a limit on new
11 debt of 273, .279 million, debt service of 175, 803 million, and total operating expenses up
12 549, 142 million. Again, these are--this is just the beginning of a conversation. To reach
13 these numbers, and I will ask the general manager to speak to this, will require them to
14 make some tough choices, I think, in terms of how we continue to fund infrastructure
15 improvements, how we satisfy the continuing demands of the regulatory world, as well as
16 of its consumers for clean and reliable water supplies. We in Montgomery County have
17 been the recipients of some really unfortunate water breaks over the past several years,
18 so we are all collectively very concerned about improving our attention to this really
19 important element of the service program provided by WSSC. And our colleagues in
20 Prince George's have had similar experiences. So, this is part of the balancing act that
21 we're gonna be starting to walk. I am sure with all government issues in the next several
22 months in times of increasing fiscal demands, limited revenue, and folks with limited
23 resources, how do we continue to provide them with the service that they deserve? So,
24 that's the committee recommendation, and if we could hear from Mr. Johnson and
25 perhaps Mr. Counihan, we'd be very pleased.

26
27 JACK????? JOHNSON:

28 Thank you very much, Madam Chairman, members of the Council, for having us here
29 today. We do recognize in great measure the concerns that you have just expressed, and
30 I don't think that they could be expressed any more eloquently. We have to strike a
31 balance between the--obviously, the provision of clean, safe drinking water and return to
32 the environment a regulatory-- regulated effluent and deal with a number of other issues



1 that are mandated by either the regulatory agencies and/or others, and we recognize that
2 we also have a great responsibility to continue the inspections program that we started
3 some time ago. And as you know, that program we've modified now to include a pipe that
4 is 48 inches in diameter up to the largest pipe that we have, and we expect to complete
5 that by 2013. One of the reasons that--the time it takes to get that done is because we
6 have to shut parts of the system down in order to go in and do the inspections, and
7 obviously, that takes time so that we assure that we keep people in water while we're
8 doing the inspections and minimize any risk associated with it. The small diameter main
9 pipe is another project--replacement pipe project is another one of the infrastructure
10 projects that we will be continuing to pursue aggressively and meeting the requirements
11 for the Chesapeake Bay with some of the improvements that have to be made both at our
12 plants out here in Montgomery and Prince George's County as well as at Blue Plains, for
13 the--for the operations that we're obligated to complete there. We also have as a front-
14 burner item the completion of a disparity study so that we can begin to proceed with the
15 establishment of a new MBE program at WSSC to replace the one that we have been
16 utilizing on an extension basis for some time. So, there are a number of things that are,
17 obviously, priorities as we go into the new budget review cycle. But what I will commit to
18 the Council is that we will do a very thorough review of the entire budget, save these items
19 that we just talked about as sort of some of the priority matters that we need to address
20 and ensure that we are doing the things that we need to do to meet the requirements of
21 clean, safe drinking water, as well as a system that does appropriate things in terms of
22 wastewater treatment. And we do appropriate and proper maintenance of the system,
23 which is very critical. It's sort of pay me now, pay me later proposition, so many of the
24 things associated with maintenance just absolutely have to be done. But we will be going
25 through and doing a very thorough review, working both with the commission, the staff
26 here in Montgomery County, the staff in Prince George's County. And with that, I don't
27 know that I have any further comments. I think we had a fairly thorough review on
28 yesterday. I'd be pleased to answer any questions you might have.

29
30 COUNCILMEMBER FLOREEN:

31 Thank you very much, Mr. Johnson. Mr. Counihan, did you want to weigh in here? We
32 appreciate your service as...

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1 GENE COUNIHAN:
2 Thank you. When you have an outstanding general manager who makes a statement like
3 he just did, it is hard to improve on it, so, I'll stick with that.
4
5 COUNCILMEMBER FLOREEN:
6 So, we shall leave it at that.
7
8 COUNCIL PRESIDENT ANDREWS:
9 You can't improve on that, either.
10
11 COUNCILMEMBER FLOREEN:
12 We shall leave it at that, Mr. President. Mr. Levchenko has provided the Council with his
13 usual tremendous piece of work analyzing the issues, and we will see that again as we
14 continue to work with WSSC on its budget.
15
16 COUNCIL PRESIDENT ANDREWS:
17 So, my understanding is that this is the maximum that the rate increase could be?
18
19 COUNCILMEMBER FLOREEN:
20 That's correct. Well, and we--I personally am very leery of how this is gonna work given
21 the fiscal environment that we are gonna find ourselves in when push gets to shove. I note
22 Prince George's is taking this up in committee I believe this week, and they may well-- I'm
23 not sure when they will have a recommendation on this subject to us, but we will continue
24 to work with them and find a place where we can both be comfortable with over the next
25 months.
26
27 COUNCIL PRESIDENT ANDREWS:
28 OK. Well, thank you, Chair Floreen. Certainly the provision of safe water and sewer
29 services is one of the most important functions of government, and we notice it when
30 there is something wrong, and we don't notice that much when it goes well, and most of
31 the time it goes very well, and WSSC has a great safety record in terms of water quality
32 and is working hard to address the challenge of improving the time--shortening of time in

45

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1 which pipes are replaced, and is focusing its efforts on those it considers most vulnerable.
2 And I know that you're pursuing additional stimulus funds. You mentioned that a lunch a
3 few weeks ago, lunch meeting, to help provide faster infrastructure replacement, which is
4 very important. So, please keep us apprised of how that goes. If we can help in any way,
5 let us know.

6
7 UNKNOWN SPEAKER:

8 Thank you very much.

9
10 COUNCIL PRESIDENT ANDREWS:

11 OK.

12
13 COUNCILMEMBER FLOREEN:

14 So, I guess we'll need to vote.

15
16 COUNCIL PRESIDENT ANDREWS:

17 I think we are ready to vote on the committee recommendation, then. All those in favor,
18 please raise your hand. And that is Councilmember Navarro, Councilmember Elrich,
19 Councilmember Trachtenberg, Councilmember Floreen, myself, Councilmember Knapp,
20 Councilmember Ervin, and Councilmember Leventhal. That's 8-0. Thank you very much.
21 Thank you, Chair Floreen. And now we're gonna move on to legislative session day
22 number 40. There are no bills for introduction. We're going to go to call of bills, final
23 reading, items 7 through 10 are in one packet. And I will turn to the chair of the
24 Management and Fiscal Policy Committee for the committee's recommendations.

25
26 COUNCILMEMBER TRACHTENBERG:

27 OK. Thank you, President Andrews. The bills and resolutions before us, Bill 2109, Board,
28 Committees, and Commissions - Amendments, Bill 20-09, Boards, Committees, and
29 Commissions - Committee Evaluation Review Board Recommendations, a resolution to
30 repeal the Dickerson area facilities implementation group and an additional resolution to
31 implement recommendations of the Committee Evaluation Review Board. A public hearing
32 was held back in May on both the bills and resolutions. There were two in management

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1 and fiscal policy committee work sessions. One back at the end of June and another just
2 back in early October, October 5, and there was a unanimous recommendation by the
3 committee against all provisions of the bills and resolutions with the exception of codifying
4 the Agricultural Advisory Committee. I would note for my colleagues that there's an
5 addendum to the packet which is a compilation of letters that were received by the Council
6 relating to both proposed bills and both proposed resolutions. The final recommendation,
7 as I said, was unanimous. One of the committee, and our recommendation was to enact
8 Bills 20-09 and the resolution to implement recommendations of the Committee
9 Evaluation Review Board with the following amendments. Again, to establish the
10 Agricultural Advisory Committee in county law, but not to merge this particular committee
11 with the Agricultural Preservation Advisory Board and Rustic Roads Advisory Committee,
12 and to delete all other provisions in that particular bill. And the other unanimous
13 recommendation of the committee was not to enact Bill 21-09 or the accompanying
14 resolution, which would repeal the Dickerson area Facility Implementation Group.

15
16 COUNCIL PRESIDENT ANDREWS:

17 Thank you, Chair Trachtenberg, for the committee's report. I believe we would take these
18 measures up separately for voting purposes, so, I don't--Councilmember Leventhal has
19 his light on. Councilmember Leventhal.

20
21 COUNCILMEMBER LEVENTHAL:

22 Yeah, I would just ask the chair, was there any discussion about the multiplicity of
23 recreation advisory boards or was it just the committee's sense that the whole bill was a
24 stinker?

25
26 COUNCILMEMBER TRACHTENBERG:

27 Well, we did have two conversations, as I indicated, Councilmember Leventhal, and there
28 was no sentiment to take any action other than what we were doing with the codification of
29 the agricultural committee.

30
31 COUNCILMEMBER LEVENTHAL:

32 Was there discussion of the Recreation Advisory Board?



1 COUNCILMEMBER TRACHTENBERG:

2 I don't recall that there was, but I would say there was clear consensus that we didn't want
3 to entertain any of the mergings that were recommended. Amanda, you might recollect,
4 but I don't remember anything about recreation. Was there? It might have been at the first
5 work session.

6
7 AMANDA:

8 At the first work session, it wasn't. The committee went through each of the provisions of
9 the bills and individually made their recommendations on the 5 sets of provisions that
10 were in the bill. At the last work session, there was not--it was focused on the Agricultural
11 Advisory Committee.

12
13 COUNCILMEMBER LEVENTHAL:

14 So it's the committee's view, then, that we need to have a Countywide Recreation
15 Advisory Board, an Upcounty Recreation Advisory Board, Mid-county Advisory Board,
16 Silver Spring Recreation Advisory Board, West County Recreation Advisory Board, and a
17 Silver Spring Citizens Advisory Board, West County Citizens Advisory Board, Mid-county
18 Citizens Advisory Board, Upcounty Citizens Advisory Board, and East County Advisory
19 Board, that we needed all 11 of those and no consolidation was worth considering. Is that--
20 - is that the committee's view?

21
22 AMANDA:

23 That was the will of the committee, yes.

24
25 COUNCILMEMBER LEVENTHAL:

26 Just wanted to clarify that for the record. I'll be voting against the bill, which--as amended.

27
28 COUNCIL PRESIDENT ANDREWS:

29 Thank you, Councilmember Leventhal. OK. We're now going to go, then, to a vote on the
30 first bill listed, is 21-09, and the committee recommendation is disapproval of the bill. And--
31 - I'm sorry. Did I misstate that?

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1 COUNCILMEMBER TRACHTENBERG:
2 Yeah. Not enact 21-09. Is that what you said? I thought you said 20.
3
4 COUNCIL PRESIDENT ANDREWS:
5 I'm on 21-09. Why don't you go ahead and repeat, this is bill--on bill 21-09, which is item
6 7, the recommendation is to not enact it. OK, so, that's what's before us. So, the motion is
7 to disapprove the bill. That's what's before. Pardon me?
8
9 COUNCILMEMBER TRACHTENBERG:
10 We don't need to approve a bill. It's a committee recommendation.
11
12 COUNCILMEMBER FLOREEN:
13 The committee recommendation to remove it.
14
15 COUNCIL PRESIDENT ANDREWS:
16 The committee recommendation was to disapprove it. Councilmember Leventhal?
17
18 COUNCILMEMBER LEVENTHAL:
19 I did want to ask Amanda whether she knows--it would seem to me that--
20
21 COUNCILMEMBER TRACHTENBERG:
22 The only thing that--
23
24 COUNCIL PRESIDENT ANDREWS:
25 Shh, shh, shh, shh.
26
27 COUNCILMEMBER LEVENTHAL:
28 There is a valid parliamentary question before the body, whether it's necessary to vote to
29 defeat a bill that is not actually before the Council, since the committee--there isn't actually
30 anything before the Council that the committee hasn't recommended favorably.
31
32

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1 COUNCIL PRESIDENT ANDREWS:
2 Well, no, it--it's a--
3
4 COUNCILMEMBER LEVENTHAL:
5 Oh, I won't move it. [Indistinct] So--
6
7 COUNCIL PRESIDENT ANDREWS:
8 OK. Well, a motion to withdraw the bills or to table...
9
10 COUNCILMEMBER LEVENTHAL:
11 There's nothing actually before the Council. It's on the agenda but the committee isn't
12 recommending it, so--but here is my question. Is the establishment of the committee
13 evaluation and review board to serve, is that required under county law? Because I would
14 just observe to those highly qualified citizens who have invested time and effort in
15 suggesting consolidation of boards and commissions that they might want to seek another
16 way to volunteer their time, because it wouldn't appear that the Council has the appetite
17 for doing that. So, are we gonna go through this exercise again in a few years of getting
18 citizens together to review all the boards and commissions only to find that board and
19 commission members tell the Council how vital they are and waste everyone's time to go
20 through another CERB report?
21
22 AMANDA:
23 Every 10 years, CERB puts forth a recommendation in the report.
24
25 COUNCIL PRESIDENT ANDREWS:
26 On the parliamentary issue, my understanding would be, and the lawyers here can correct
27 me if I am wrong, but our practice has been to bring bills to the Council regardless of what
28 the committee recommendation is, whether it's pro or con, for Council resolution. The
29 Council could vote to accept the committee recommendation, to reject it, or to send it
30 back, table it. There are all kinds of options. But we have--we have as a practice brought
31 bills out of committee with whatever the recommendation happens to be. Sometimes the

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1 Council accepts it, sometimes it doesn't. Committee recommendations don't always hold
2 at full Council, as we know. So--

3
4 COUNCILMEMBER LEVENTHAL:

5 If I could return to my prior question. When will the next CERB board be required to be
6 appointed under county statute? Do we know that? The last report, I think, came out in
7 2003.

8
9 AMANDA:

10 I believe it was 2004. It might have been 2003, so the next report should be--

11
12 COUNCILMEMBER LEVENTHAL:

13 Well, the CERB is probably appointed in '03. They took about a year. They reported back
14 in '04. So, it's now 2009. So, within the next few years, we would need to go through this
15 exercise again, which would appear likely to be an exercise in futility.

16
17 AMANDA:

18 Well, I do know the...

19
20 COUNCILMEMBER LEVENTHAL:

21 But of course, if I introduced a bill to get rid of the CERB, that would fail, too. So, we
22 probably couldn't get rid of that either.

23
24 AMANDA:

25 I don't know what the role of the Council would be, but--I do know that at the last CERB
26 report, there were bills immediately after that did actually take some of the
27 recommendations...

28
29 COUNCILMEMBER LEVENTHAL:

30 About 10% of the recommendations...

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1 AMANDA:
2 Yes. Yes.
3
4 COUNCILMEMBER LEVENTHAL:
5 I introduced that bill. And as with this, about 10% of it was accepted back in 2005.
6
7 COUNCILMEMBER TRACHTENBERG:
8 Yes.
9
10 COUNCIL PRESIDENT ANDREWS:
11 I think it would make sense to get some clarification on the parliamentary issue as to
12 whether, and we could come back to this. Perhaps we should move forward at this
13 juncture.
14
15 COUNCILMEMBER LEVENTHAL:
16 May I suggest something, Mr. President? I think it's the Council President's call. I think you
17 can just rule as to whether or not we need to vote.
18
19 COUNCIL PRESIDENT ANDREWS:
20 Yes. Yes. All right.
21
22 COUNCILMEMBER LEVENTHAL:
23 Well, the Council President placed it on the agenda, and the committee has
24 recommended that the Council vote these bills down. So, if the Council President desires
25 to bring it up to a vote, I would acknowledge it's the Council President's prerogative
26 whether or not to call a vote at this time.
27
28 COUNCIL PRESIDENT ANDREWS:
29 Well, I don't think it's necessary to have a vote at this time, so I would suggest that we--
30
31
32

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1 AMANDA:
2 Phil, you do have--you have one bill that the committee recommended approval with
3 amendments.
4
5 COUNCIL PRESIDENT ANDREWS:
6 All right. OK. Let's deal with that one.
7
8 AMANDA:
9 That's 20-09.
10
11 COUNCIL PRESIDENT ANDREWS:
12 OK. Very good. All right. So, we will--we will make up. You don't need to.
13
14 [All talking at once]
15
16 COUNCILMEMBER LEVENTHAL:
17 No, the committee--no, the committee recommendation equates to a motion.
18
19 COUNCIL PRESIDENT ANDREWS:
20 The committee recommendation is a motion, and so what we will do is we will take up bill
21 20-09, which the MFP committee has recommended approval with amendments, and we
22 will not be taking action on the other 3. So, bill 20-09 is now before us. There are 2, yes.
23 There's--there's--item 10 also is a recommendation for approval on the action on CERB.
24 So, items 8 and 10 we will vote on. Councilmember Trachtenberg, the MFP committee is
25 recommending approval of amendments of item 8, bill 20-9. Is there any comment on that
26 bill at this time?
27
28 COUNCILMEMBER LEVENTHAL:
29 As stated, I will be voting against it because I'm not comfortable with the committee's...
30
31 COUNCIL PRESIDENT ANDREWS:
32 OK. All right. The clerk, then, will call the roll on bill 20-09.

53

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1 CLERK:
2 Miss Navarro.
3
4 COUNCILMEMBER NAVARRO:
5 Yes.
6
7 CLERK:
8 Mr. Elrich.
9
10 COUNCILMEMBER ELRICH:
11 Yes.
12
13 CLERK:
14 Miss Trachtenberg.
15
16 COUNCILMEMBER TRACHTENBERG:
17 Yes.
18
19 CLERK:
20 Miss Floreen.
21
22 COUNCILMEMBER FLOREEN:
23 Yes.
24
25 CLERK:
26 Mr. Leventhal.
27
28 COUNCILMEMBER LEVENTHAL:
29 No.
30
31 CLERK:
32 Miss Ervin.

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1 COUNCILMEMBER ERVIN:

2 Yes.

3

4 CLERK:

5 Mr. Knapp.

6

7 COUNCILMEMBER KNAPP:

8 Yes.

9

10 CLERK:

11 Mr. Berliner.

12

13 COUNCIL VICE PRESIDENT BERLINER:

14 Yes.

15

16 CLERK:

17 Mr. Andrews.

18

19 COUNCIL PRESIDENT ANDREWS:

20 Yes. So, Bill 20-09 is adopted as amended by the MFP committee, 8-1. We'll now move
21 on to action on item 10, which is a resolution to implement recommendations of the
22 Committee Evaluation Review Board. The MFP committee is recommending approval with
23 amendments. Is there any discussion on this issue? Seeing none, we do not need a roll
24 call on this. This is a vote. There is a motion in effect. The committee is the motion.
25 Committee recommendation is the motion. All those in favor of the committee
26 recommendation on the resolution to implement recommendations to the Committee
27 Evaluation Review Board, Item number 10, please raise your hand. That's Councilmember
28 Navarro, Councilmember Elrich, Councilmember Trachtenberg, Councilmember Floreen,
29 myself, Council Vice President Berliner, Councilmember Knapp, Councilmember Ervin in
30 favor. Opposed? Councilmember Leventhal. So, that resolution is approved as amended,
31 recommended by the MFP committee, 8-1, and we will now move on to the White Flint
32 Sector Plan overview, and we've allocated about half an hour for this, and then we will

55

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1 adjourn to meet with the Revenue Authority upstairs in the sixth floor conference room,
2 and then we have a closed session at 1:00. So, I'll ask all those who are here to present
3 the overview of the White Flint Sector Plan to join us at the front table. Welcome,
4 everybody. Why don't you ask--Miss Lauer, I have a--just a quick question for you. All
5 right. We have the first of 2 fairly long public hearings tonight on the White Flint Sector
6 Plan, and this morning we are getting overview of it from the planning board. And they are
7 with us. The chairman of the planning board Dr. Hanson accompanied by his able staff.
8 And so I will turn to you, Chairman Hanson, for your introduction at least of the overview
9 of the White Flint Sector Plan.

10
11 ROYCE HANSON:

12 Very good. Thank you, Mr. President. What we'll do this morning, give you a short
13 presentation, then we'll be ready to answer any preliminary questions that you might have.
14 You're going to hear a lot of testimony tonight and Thursday, and I think about the same
15 number--maybe a few more people than we actually heard in our testimony. With me here
16 this morning is Piera Weiss, who was the principal planner involved in putting it together;
17 Jacob Sesker, who is our economics planner; the planning director Rollin Stanley; and
18 Dan Hardy, our director--chief of our transportation division, and they'll be able to get into
19 greater detail. I'm filibustering here for a moment till Piera gets set up. The White Flint
20 plan, I think, is one of the most important that will come before this Council, maybe one of
21 the most important that any Council has received in the last several years. It is a very
22 important strategic point in the county, and we have tried to develop a plan that makes the
23 best use of smart growth approaches and is designed to be sustainable, both from an
24 environmental and energy point of view and from a fiscal point of view. So, I see the
25 presentation is up now. I'm going to turn to Piera who will lead you through a short
26 presentation of the plan to help you set the context for your public hearings.

27
28 COUNCIL PRESIDENT ANDREWS:

29 Thank you.
30
31
32



1 PIERA WEISS:

2 OK. OK. As you know, White Flint is the fourth of the corridor plans that the Council has
3 been through, still in the process of completing Gaithersburg. Left click? OK. This is the
4 White Flint area. It's about 430 acres in total, and dead center is the Metro stop. And as
5 you can see, there is a 1/4-mile circle and the 1/2-mile circle, dead center on Metro, and
6 most of the Sector Plan area is within that 1/2 mile. And much of it is walkable if you think
7 about being able to walk from any place at the four corners into the center. Existing land
8 use, primarily commercial use, as that's in red. There are some mixed uses associated
9 with the TSM zone at the Metro station, the project that's being constructed today with the
10 tall tower. Sterling and some mixed uses over here. And there are 4,500 multi-family units,
11 2,500 of which are existing and the other 2,000 are in the process. The vision. The plan
12 has a vision that we developed over the process of the plan. It has six components, the
13 concept of the core at Metro, the concept of mobility for multi-modal users, cars, bicyclists,
14 pedestrians. It relates to buildings as forming the public realm. The notion that everything
15 has to be compatible with the surrounding area. The development must be sustainable,
16 and we're going to be providing in this Sector Plan, which is something that hadn't been
17 done before in the 1992 plan, a public open space system. I'd like to play for you a video
18 of the work that we have done about a year ago, using CommunityViz and GIS to model
19 some of the ideas of what the buildings could look like with the kinds of densities that
20 we're talking about. The densities of which I believe we did 12 different scenarios
21 comparing transportation mobility and densities in different iterations, and this is the one
22 that was modeled on the most recent one, and we're going up the Pike. There is the Metro
23 on your right. That's the Sterling building which exists today. And we're rotating around to
24 look back down the Pike. Again, the Metro station, the NRC building on your left. How do I
25 get out of it? Move forward? Where? OK. It's not going. Next. OK. Land use. This is a
26 comparison of the 1992 plan and the 2009 plan, the Metro being the blue, and the mixed-
27 use concept was basically, from end to end, widthwise, about a little more than half of the
28 Sector Plan area today. What we're looking at today in the 2009 plan is creating more of a
29 core which extends somewhat down the Pike, and extending the concept of mixed-use
30 throughout the entire area. Critical to the success of a transit-oriented plan is walkable
31 streets. There are many factors that go into walkable streets. These are just a few. Some
32 of these have been put into the CR zone as incentives to make a better place, and we



1 developed the grid based on trying to create more connections for pedestrians as well as
2 more connections for cars to move around the area and get as much traffic off the Pike.
3 We modeled the grid-- this is scenario number 12, to see where they were points of
4 congestion. Then we took that work and we put it into an overall transportation system,
5 which is shown on this map, and we--using the context-sensitive road code that we have,
6 we worked on the kinds of cross-sections that give us the best walkability and traffic flows
7 and potential for on-street parking. We added the bikeway network. We have a bikeway
8 network that includes connections to the regional bikeway system. We have shared paths,
9 bike lanes and shared paths along the street. One of the big, big ideas in the Rockville
10 Pike and one of the most costly is the reconstruction of Rockville Pike as a multi-modal
11 system, transit-ready for bus rapid transit, median walkable areas, sidewalks on both
12 sides for the entire length, and making it the place that is-- is White Flint, is Rockville Pike.
13 There are some issues about how we do that in the right-of-way, and we have a right-of-
14 way that is 150 feet to 162 feet, in order to accomplish all the things that are necessary for
15 it. A big issue also is improving transit options. On the right we have the Metro station, and
16 we're proposing a second entrance, which makes accessibility to Metro more convenient
17 for the people on the other side of Old Georgetown Road. We are also recommending
18 relocation of the MARC station in the location of--right off Neville, so we can create a
19 transit-oriented development around it. And also critical to the success of all of this is
20 getting people to think about not using their automobiles. And in order do that, you have to
21 provide incentives, such as travel demand management, managing parking, and
22 establishing goals, and providing places for people to use Zipcars and bicycles and
23 walking. The buildings that form the public realm. In an urban center, the buildings,
24 especially what happens at the first floor, are critical to creating an inviting walking
25 environment where people live, where people work, and getting from one place to the
26 other. We really looked at this in great detail and tried to establish a pattern that related to
27 the established neighborhoods all around the edges: White Flint Estate, Garrett Park
28 Estates, Woodford,???? and various other areas, and how this development in density
29 would relate to those places and how to make the correct transitions in compatibilities with
30 different heights and different densities. We did that--we have some examples of how this
31 works. We want tall buildings along the Pike. This is the JBG Building that's under
32 construction today, and then we have the very residential neighborhoods, 2, 3 stories, on



1 the edges. And in this picture, which comes from Bethesda, you can see that you can
2 create transitions with taller buildings, 4- or 5-story buildings, and smaller buildings so that
3 you can have a transition. That's a shot of the back, but I think it gets the point across. We
4 took these ideas and we began to apply them to districts and neighborhoods, and the part
5 being--parts making up the whole and the whole being broken down into parts, and we
6 created the analysis areas through the districts and tried to create neighborhoods within
7 each of the districts where we had the best chances and the most possibility for
8 connecting new neighborhoods to existing neighborhoods and creating linkages between
9 all of them. We then took that concept with the compatibility of building heights and
10 densities, concept of districts and neighborhoods, and put it together using CR Zone to
11 fashion exactly the kinds of things we wanted to happen in every area. And as you know,
12 the CR zone creates a lot of incentives to accomplish these things. And then we codified it
13 here, creating most of a mixed-use zone for the 438 acres. The thing that was missing
14 from the 1992 plan was the concept of an open space system. Inherent in the zone of the
15 TSM and the TSR zones that were recommended in the 1992 plan is for public use space
16 or public open space, but there was no concept of how to put it all together. And we spent
17 some time really looking at that, and Wall Park becoming our urban park for the area to
18 get rid of the parking there, and make it more usable as a recreation area. We're adding
19 park land to the existing White Flint neighborhood park, which provides a park that you
20 can see--service both the south side existing neighborhoods as well as the ones above.
21 And then we've located within each of the neighborhoods in the district places where we
22 believe important public open spaces should be. And they're not necessarily big public
23 spaces, but they should provide enough space to do things in. The most important one
24 and the largest one, which is about an acre, the plan is recommending, is the civic green
25 as the central locating area and identifying area for all of White Flint. But all of the others
26 are to be located within the neighborhoods, and hook together to make sure that the
27 streets that serve these areas are-- the environment--it's essentially walking through.
28 We've also created a recreation loop with its extensions that connects the entire system
29 together. Sustainability. We have 161 acres of parking in White Flint and only 11 acres of
30 park, and we'd really like to make this ratio a little bit better, a relationship better, and in
31 order to make it more sustainable, we have to get rid of a lot of the imperviousness that is--
32 -not having a value and turning it into things that work better for us, such as sidewalks and



1 more streets, and making sure that we use other techniques that are best management
2 practices to get more trees, tree canopy and vegetation, energy-efficient buildings.
3 Modern storm water management treatment to make this better--a better place for the
4 environment for people as well as for the environment in general. We're recommending a
5 series of public facilities to support the area. We are recommending the satellite regional
6 service facility, the library. We have a couple of locations for the satellite facility. We have
7 a couple locations for the library. Depending on what developers are interested in doing,
8 we have the civic green, which is the star. We have fire and emergency located to the
9 north. We have a police substation also there. Talking about renovation and [indistinct] of
10 Wall Local Park. Expanding again of the neighborhood park on the left. One of the big
11 controversies that you'll hear--no doubt hear much on is the elementary school, the draft
12 plan recommending elementary school on an existing 16-acre site in the Randolph Hills
13 civic neighborhood. Proposed development. The plan recommends that the 9,800 units in
14 about 5.69 million square feet is what can be managed by the transportation and mobility
15 analysis. And that would total--if you add the existing things today, to about 14+ dwelling
16 units and about 12.9 million square feet of other mixed uses. And how does that work out
17 into the staging? One of the most important things the planners do is envision how this
18 happens in an orderly fashion. So, the things that are necessary to support them are
19 provided in the right sequence. And we broke the overall development into 3 stages,
20 which are shown here in the next slide. We'll show you exactly what happens in them. But
21 I thought for comparison you should be able to see how does space one compare to the
22 1992 plan in terms of total amount or less, and then as we add on phases 2 and 3, what it
23 looks like in a comparative chart. And finally, staging. This is impossible to read but it lays
24 out for the reader of the plan exactly what things have to happen first. The biggest
25 concept that we have to deal with is reconstruction of Rockville Pike, and that requires a
26 workaround for Rockville Pike prior to doing that because if you do it before, you won't
27 have any place to drive. So, a lot of Stage 1 deals with creating the proper infrastructure
28 to support a workaround for Rockville Pike. Phase 1 is heavy on infrastructure, Phase 2 is
29 heavy on infrastructure, and by Phase 3, most of the things will have been done that are
30 necessary, and that's when you can begin to reconstruct Rockville Pike. And finally, we do
31 make some recommendations about how you can oversee the orderly development of the
32 area, and one of them is to create some kind of administrative office that will do that,



1 whether it's a system we already have in place or another entity, and second, financing it,
2 which is a big, important point of building the plan. And so the plan makes some
3 recommendations about what kinds of financing mechanisms are possible. And finally, the
4 Executive's fiscal impact statement did conclude that there is a net fiscal benefit of \$6.9
5 billion over 40 years and an annual net fiscal benefit of \$1.3 million, so that the plan is
6 fiscally feasible. 131 million. Sorry. And that is the end of the presentation. Thank you.

7
8 COUNCIL VICE PRESIDENT BERLINER:

9 Mr. Chairman, did you have anything you wanted to add to that presentation?

10
11 ROYCE HANSON:

12 I think we would be happy to respond to any questions you have. I think a couple of key
13 things are important. One is that the success of this plan depends very heavily on the
14 establishment of the street grid system and the reconstruction of Rockville Pike. Both the
15 phasing plan and the plan itself suggests ways in which that can occur. So that the
16 financing mechanism that is established can provide the increment of money that will be
17 necessary to make sure that the street grid is in place and that the improvements to the
18 transportation system generally are made so that Rockville Pike can be reconstructed. So,
19 that's a very key element, and so the-- the transportation network, the phasing system and
20 the financing mechanism, are all interrelated.

21
22 COUNCIL VICE PRESIDENT BERLINER:

23 And could you share with us your understanding of where things stand with the Executive
24 branch as it relates to the financing mechanism?

25
26 ROYCE HANSON:

27 We understand that the Executive branch will be bringing forth a financing mechanism.
28 One of the things I will say today and will tell you again that we believe -- that it is
29 important that that financing mechanism be established as you adopt the plan and the
30 sectional map amendment. That way, everybody knows what's going to happen and we
31 know what will be in place. What is very clear from the analysis that we did in the
32 development of the plan, the analysis that was done by the private owners of land in the



1 area, and what the Executive's fiscal analysis demonstrates is that this is a plan that can
2 produce the kind of increment in financing necessary to build the infrastructure,
3 particularly the transportation infrastructure, that's necessary for the plan to work, and
4 work as it should.

5
6 **ROLLIN STANLEY:**

7 Rollin Stanley, planning director. We started engaging the Exec's office 15--May of 2008,
8 and started the movement forward, really, in December of last year. They retained a
9 consultant. We're waiting to get a copy of that consultant's report now, the actual
10 specifics, but leading into that, we had done a lot of work, as I'm sure some of you are
11 aware, with the property owners getting information on what they're projected for with
12 revenue. Those sorts of things, to try and get a handle on how much we thought it could
13 generate over the lifetime of the plan, and what portion of that would be needed to actually
14 finance a lot of the infrastructure, so we moved that agenda quite a lot in ways and turned
15 that information over to the County Exec, and while we've got a piece of that back, we're
16 waiting to get the specifics about some of their work. But what we found in the preliminary
17 projections was we only needed a small percentage of what was being generated to help
18 pay for the infrastructure. That was not already going to be provided in the staging by the
19 developers themselves.

20
21 **ROYCE HANSON:**

22 We had made some initial suggestions of the kind of mechanism that might be
23 established, but the Executive felt that they would like to have the initiative establishing
24 the mechanism, and that's perfectly all right with us as long as there is one.

25
26 **COUNCIL VICE PRESIDENT BERLINER:**

27 Mr. President, if it's all right with you, I'll continue my questioning. I believe I was the first
28 one up to be asking questions. Needless--needless to say, I think we're about to hear from
29 what, 90 people over the course of the next three days. There is a fair amount of interest
30 and there's a fair amount of interest in my district with respect to this matter. It is obviously
31 a matter that goes far beyond in terms of its importance to our community, my district, but
32 it is my district that feels as though it will be most affected by this. We have received a lot

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1 of communication with respect to this matter. I know that you have seen a lot of
2 communication with respect to this plan and...

3
4 ROYCE HANSON:

5 We had about four years of communication on it.

6
7 COUNCIL VICE PRESIDENT BERLINER:

8 Well, I would appreciate, and perhaps my colleagues would, if you would take a few
9 moments as we are about to embark on this public hearing to provide us at least your
10 views with respect to the criticisms that are being made with respect to this proposal. So,
11 with your forbearance, what I'll do is I'll just read you some of the bullets that are shared
12 with my colleagues and I and give you, as the proponents of this plan, an opportunity to
13 share with us your point of view as to these issues, because they are important issues,
14 and typically, my colleagues and I care most about the things that are, quote, issues. So,
15 these are some subset of the issues. First one is -- 68,000 people, no plan to increase
16 public transit.

17
18 ROYCE HANSON:

19 Mr. Hardy, I think, will respond to that.

20
21 DAN HARDY:

22 For the record, Dan Hardy, transportation planning chief. I think the first thing that we are
23 doing is looking at how can you maximize the use of existing transit, and that's definitely
24 true. We're building on a Metrorail station. The WMATA and--we've worked with WMATA
25 and we understand that the biggest concern of near-term Metrorail capacity is access to
26 the station. Hence, we recommend a second Metrorail station entrance that increases the
27 walkability of the plan and provides capacity to the platform, and really funding Metrorail
28 expansion. There is more capacity in the Metro system. It's gonna be challenging to get,
29 because it'll take money to buy additional rail cars. We also recommend reconstructing the
30 Pike in a way that we get bus priority lanes on the Pike. There's gonna be a lot of
31 discussion about the best way to get bus treatment from the Pike. We believe the plan
32 does what's right for today. We know the county's gonna be studying bus rapid transit

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1 options on the Pike in the future as well. We also have recommended a MARC station
2 location in the plan. All of these three things are physical improvements that the plan has
3 to put into play so that we get those pieces of capacity built. We will also be working with
4 the Executive staff on how to effectively put together a transit circulation plan that uses
5 Rockville Pike, uses the enhanced street grid to get people both to and from locations in
6 the plan area as well as to and from Metrorail and MARC. Those are operational
7 recommendations. We've got some ideas in the appendix as to how they might be
8 organized, but obviously that's something that will be implemented over time as the plan
9 evolves. So, we think there actually is a lot of additional transit infrastructure and service
10 in the plan.

11
12 COUNCIL VICE PRESIDENT BERLINER:

13 All right. Number 2. Increased congestion, cut- through traffic. An example being a 53%
14 increase in Old Georgetown Road and a 68% increase on Edson Lane and 45% on
15 Rockville Pike.

16
17 DAN HARDY:

18 I think traffic growth is one of the things we obviously have to work with here. White Flint is
19 a place that's got a lot of parking, as we've mentioned, and we're trying to figure out a way
20 to take the asphalt off the parking and put it into streets and sidewalks, so we're basically
21 increasing the street grid in the White Flint Sector Plan area by about 50% in terms of lane
22 miles of grid. I think the streets you mentioned are all roads in the plan that we would
23 expect to be carrying traffic. We are gonna be seeing shorter trips made as more dense
24 development comes to Metrorail, but make no mistake, our information does show that
25 there will be a total increase in traffic. We're trying to figure out how to maximize the use
26 of the existing capacity in the system. Part of that grid is pieces that you have already
27 been implementing, so with Citadel Avenue recently opening, with Montrose Parkway
28 having its own staging plan for getting built, for Chapman Avenue in the facility planning
29 process. Those are pieces of the grid that are already coming on line. We actually do think
30 that the grid itself will help Rockville Pike by providing better ways to get around the Pike
31 and across the Pike without having to have so much traffic getting on the Pike.
32

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1 COUNCIL VICE PRESIDENT BERLINER:

2 Overcrowded schools. Redistricting is a solution.

4 ROYCE HANSON:

5 The increase in school enrollment necessary to require an additional school sites will not
6 occur early in the planning process. What the master plan recommends is the use of an
7 existing school site which is now being used for other purposes by the school system.
8 Rocking Horse. The board was divided on how to respond to the school need, with the
9 majority of the board feeling that it was important to provide a school site which would be
10 comparable to other school sites in the area. I know there is concern about this in terms of
11 whether or not this would involve redistricting in the area. That is a question that is really a
12 determination that ultimately would have to be made by the board. We had looked at
13 school sites within the plan, one of which would have added a school site where the
14 majority of the board instead placed a park, at the White Flint Park on the east side behind
15 the mall.

17 COUNCIL VICE PRESIDENT BERLINER:

18 Let's see. 300-foot building heights up and down the Pike.

20 ROYCE HANSON:

21 Uh, Piera?

23 PIERA WEISS:

24 Yeah, the 300-foot building height is a maximum and it's only recommended at the Metro
25 station, and then for some--less than a quarter mile from the Metro station. The 300 feet is
26 an approximation of the tallest buildings that are there today. We use that as a point of
27 beginning. We also know that the right-of- way that needs to be dedicated and the amount
28 of public use space that needs to be dedicated makes it difficult for some of the smaller
29 properties to be able to achieve the densities that we're looking at on site without being
30 taller. There's a relationship [indistinct] the size of the site -- what you want from a site --
31 and how tall is should be. This was discussed at great length with the planning board, and
32 planning board members asked me the same question -- why 300? 300 makes some

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1 sense in order to be able to have a sense of place. It matches some of the heights that
2 are already out there. However, we are not recommending it be the entire length of the
3 Pike. We recommend in certain places where we think it's important to have it, and we're
4 rapidly bringing the heights down at the edges and in the key areas where we want to
5 have transitions. So, I believe it's--it would be overstating the point that 300 feet would be
6 everywhere, and a lot of people aren't going to build to 300 feet. It may not be a cost-
7 effective for them, and that assumes being able to go to your maximum density, which we
8 also know is not necessarily a foregone conclusion.

9
10 COUNCIL VICE PRESIDENT BERLINER:

11 Rockville Pike developed last, if at all. You gave some expression to that, but if you'd like
12 to amplify at all with respect to that, I wanted to give you...

13
14 ROYCE HANSON:

15 This--well, the redevelopment of Rockville Pike is really critical to the plan. And its
16 redevelopment, I think, was one thing on which I believe all of the members of the
17 advisory committee, which consists of about 50 people meeting over about three years --
18 one thing on which everybody agreed, that this was really important and that it was highly
19 desirable. To make that happen, it is important to have an opportunity for people to get
20 around the Pike so that it can be redeveloped. Therefore, you can't as a practical matter
21 redevelop Rockville Pike first. You need to have the workaround so that Rockville Pike
22 can be redeveloped. And the staging mechanism is designed also to make it possible for
23 each increment of development to be adequately served by the transportation capacity
24 that needs to be there, either first or as the development occurs so that Rockville Pike can
25 actually happen.

26
27 ROLLIN STANLEY:

28 I think it's important to remember that the City of Rockville has already designed a cross-
29 section for Rockville Pike that we're trying to integrate with what we're proposing and
30 advocating in the plan so that they can mesh.

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1 JACOB SESKER:

2 And for the record, Jacob Sesker. I would add to that as well that the cost of the
3 improvements to the Pike would probably be substantially greater if the Pike project is
4 moved forward that was one of the considerations that we considered when we were
5 moving through the work sessions, is that the cost of right-of-way acquisition for the
6 boulevarding of the Pike would increase as you move that project forward.

7
8 COUNCIL VICE PRESIDENT BERLINER:

9 OK. Next, the board's Midtown on the Pike makes weak provisions for the civic and
10 cultural amenities that in fact make cities livable. It does not require a full-sized library,
11 community center, theater, senior center, or child care facility.

12
13 ROYCE HANSON:

14 We have provided an express library. I think our approach was to take the advice from the
15 Executive on the size of library that is to be provided. The zoning system that is provided
16 here has a lot of incentives in it for the provision of major cultural features ranging from
17 artwork to various other kinds of civic venues. We have provided for a common area near
18 the Metro center. We have provided for much more public space than is in any other
19 urban master plan in the county and for the linkage of that space, and we also -- one of
20 the things that we were quite conscious of is that this site is one Metro stop from
21 Strathmore Hall. So, we didn't feel that it was useful to try to replicate that kind of major
22 cultural icon in the area. We do have the civic center in the area, of course, and we've
23 tried to be sensitive to this. We have provided for a lot of other public facilities that are
24 needed in the area, additional fire service, additional police service, library, so on.

25
26 PIERA WEISS:

27 And with respect to child care, we think it's been added as an incentive in the zone. So,
28 that's a provision that we think is--can be provided in any number of places. It doesn't
29 have to be specifically designated.



1 ROLLIN STANLEY:

2 If I may, it's also important to go something-- back to what you said in another meeting,
3 Councilmember, where you talked about looking at what Bethesda's achieved and what
4 Silver Spring has achieved. Let's use Silver Spring for a quick example. The most active
5 space in Silver Spring is the street and the sidewalks. The most cultural activity in Silver
6 Spring is the street and the sidewalks. And it's that way because there's activities lining
7 those streets that generate that activity. If any of you go down there on a Wednesday,
8 Thursday, Friday, or Saturday night, in fact, even Sunday afternoon, they're incredibly
9 busy. In fact, the folks there are organizing things all through the day, where there are
10 school kids coming down, etc. So it's important to remember that the most cultural, active
11 spaces in any urban environment like a Silver Spring or a Bethesda is the street and
12 sidewalks. And obviously, in White Flint now, it's a parking lot. You're not going to
13 generate that. So, just by virtue of trying to get those activities along the street, you're
14 providing those kinds of spaces where people go in the morning to have a coffee and
15 communicate. Hear a senior citizen. Those kinds of things.

16
17 COUNCIL VICE PRESIDENT BERLINER:

18 Council President, I know that we're pressed for time. I appreciate the opportunity to raise
19 the concerns that the community is raising and to give the planning board an opportunity
20 to respond directly to the concerns the community has expressed, particularly as we're
21 about to enter into two evenings of testimony. I thought it'd be nice for all of us to at least
22 hear from the planning board as to their responses to these criticisms. So, I thank my
23 colleagues for their indulgence.

24
25 COUNCIL PRESIDENT ANDREWS:

26 Thank you, Council Vice President Berliner. We have 2 more colleagues who have their
27 lights on. I'll turn to Councilmember Knapp, chair of the PHED committee.

28
29 COUNCILMEMBER KNAPP:

30 Thank you, Mr. President. I'll be very brief. As we do the financing piece, and my
31 expectation is it'll be something we do jointly with the MFP committee, to the extent that
32 there are alternatives. We know the County Executive's gonna be doing something. I



1 know that you've spent a long time looking at the financing piece. To the extent there are
2 other options in addition to what you've proposed, just so as we can look at kind of the
3 array of opportunities available for financing mechanisms. I'll let you explore. I think that'll
4 be helpful.

5
6 ROYCE HANSON:
7 We'll be delighted to engage in that discussion.

8
9 COUNCILMEMBER KNAPP:
10 Thanks.

11
12 COUNCIL PRESIDENT ANDREWS:
13 Thank you, Councilmember Knapp. Councilmember Trachtenberg.

14
15 COUNCILMEMBER TRACHTENBERG:
16 I would imagine, Councilmember Knapp, that we'll be having that conversation very
17 shortly. Well, I have the pleasure, clearly, of representing the entire county as an at-large
18 member of this body. I also have the pleasure of living right in the White Flint area.

19
20 ROYCE HANSON:
21 We hope to give you much more pleasure.

22
23 COUNCILMEMBER TRACHTENBERG:
24 And I've lived there 20 years, and clearly have observed the evolution of the community,
25 and as I joked last week, most nights when I return home, I have at least one or two
26 voicemail messages from neighbors. Now, what I would tell you is some of them are
27 thrilled about what's being proposed, and clearly some of them are not thrilled with it. And
28 I just wanted to bring up seven issues. Again, I'm not gonna go into great detail, but I
29 would--I would ask that the PHED committee, in their discussions, at least have some
30 dialogue about all items that I've--that I've raised, and obviously, I'll come back to them
31 when this is before the full Council. One is the issue of traffic flow. And as someone who
32 lives right off Old Georgetown Road, between Nicholson Lane and Edson Lane, those are



1 two major streets -- really, Nicholson clearly being the larger capacity at this time -- they
2 are filled with cars, usually morning and evening, because people who are coming out of
3 the office sites off Executive Boulevard have discovered that they're good cross-throughs
4 to the Pike and vice versa, those coming from the Pike that want to get on 270. I live in a
5 gated community between both those streets, and what I can tell you is that at 5:00 at
6 night, you cannot actually get out of my development onto Nicholson Lane. The cars back
7 up. We've had all kinds of problems with the gates because of this, and I've begun to see
8 the same problem on Edson Lane, and that's a one-- two-lane -- one lane each direction
9 road, and again, when that was configured years ago, there was no direct access into the
10 White Flint Mall, as we know. One of my neighbors played a very critical role in making
11 sure that that would happen. And I guess what I'm saying is that this is something that we
12 all need to have conversations about, but I can assure you that if there is one thing that
13 my neighbors are pointing to that's got them concerned, it's this, and we have now cars
14 parked on that street as well that never used to be there before, and they're parked there
15 because people have discovered they can park and walk to the Metro. So, there are an
16 assortment of issues with traffic flow. School capacity -- I'm sure this is not a surprise that
17 I'm raising this. And one of the questions that I've routinely heard on my voice mail, is one
18 school site sufficient? And that is an issue of great importance to especially young families
19 that are moving into the area and moving into a lot of the condominium apartments that
20 are right up on the Pike. The other issue that's getting raised is the feasibility of a
21 circulator bus. We used to have one of those when we were a much smaller community,
22 and it was discontinued for an assortment of reasons, and it would seem to me that that's
23 part of what we're gonna have to entertain if we're looking to get people out of their cars
24 and bringing them over to Metro and other resources in the community. Councilmember
25 Knapp raised the issues around the fiscal formula and what is gonna be the right mix, and
26 obviously, that will be entertained in PHED and MFP, and one of the other issues that my
27 neighbors and my constituents are raising with me -- will there be adequate coordination
28 and oversight around the use of development districts, excise taxes, whatever? Whatever
29 we decide. Whatever formula is approved of this body. And I raise that because I think
30 that's a significant part of what we have to discuss and make a decision on in the not so
31 distant future. Child care facilities -- we've already heard about that. And, again, it would
32 seem to me that saying that benefits are provided for those that will make that available is



1 one thing but actually having facilities identified for that purpose is part of what I believe
2 the community is looking for, and the same thing would be said for senior center facilities,
3 and the fact that we do have a number of retired seniors that actually live in a number of
4 the apartment buildings that have been constructed in the last 10 years. And I, again,
5 think we've gotta be more specific than just saying we're gonna -- we're gonna provide an
6 incentive. We've actually got to, I think, impress upon the neighborhood and really make a
7 very visible commitment around location. And the last thing, which I think is probably one
8 of the more challenging issues that we have to continue to really work on, is the
9 connectivity issues with existing communities. I have had e-mails, as I'm sure the rest of --
10 everyone here has had them -- from communities that don't want any connection to what
11 is going on or what potentially is gonna go on on the Pike. But there are other
12 communities that are yearning -- the ability. They're looking for the opportunity to be able
13 to walk safely on the Pike, because as we all know, if we're looking to redevelop White
14 Flint and create it into an urban setting, one of the things we're actually gonna have to
15 accomplish there is making it a pedestrian-safe community. And right now it's not. And
16 part of that is because of the ongoing construction, but I also know that given the
17 challenges that people have in navigating the Pike right now, it's not giving them a comfort
18 zone in terms of what we intend on doing in the future, and again, I've had that very
19 difficult conversation with neighbors because many of them see what's going on right now
20 as more permanent than it really is, at least in terms of 355. And so I really believe one of
21 the things that needs to be worked out with the current owners of the different retail
22 spaces is coming up with more safe paths at this time for both people on foot, on bicycle,
23 and also in their cars because that particular section of 355 is a really dangerous obstacle
24 course in the dark and in the rain, and I travel it daily. And I have seen many risky
25 situations, and I've also seen a lot more accidents that I'd ever seen before. And again, I
26 recognize it's a temporary formulation. However, for those that have lived in that
27 community for 10, 20, 30 years, they're not looking at it as temporary. They're thinking this
28 is what they're going to face with the redevelopment, and I would encourage all of us to
29 keep that in mind as we try to work through this particular master plan. Again, I thank you
30 for your work on it. I'm sure I'll have more ideas and more questions as we go forward, but
31 I wanted to put those items out on your radar screen at this time, and my colleagues' as
32 well, because in a nutshell, I believe those are the issues that are most prominent on the

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1 minds of the people that have resided and thrived in the White Flint area of Montgomery
2 County.

3
4 ROYCE HANSON:

5 We'll be prepared to address those as we go through the PHED committee, and also, if
6 you or any other members have issues that you want to be sure we've addressed, we will
7 be happy to do that.

8
9 COUNCIL PRESIDENT ANDREWS:

10 Very good. Thank you, Mr. Chairman. Thank you, Councilmember Trachtenberg. That
11 was a good preview for the public hearing tonight and Thursday night. In terms of the
12 Council schedule now, we're going to need a motion for a closed session that is
13 scheduled at 1:00 upstairs in the sixth floor conference room. OK. All right. Here you go.
14 You gotta read this. So.

15
16 COUNCILMEMBER FLOREEN:

17 I would like to move -- closed session to consider a matter that concerns a proposal for a
18 business or industrial organization to locate, expand, or remain in the state pursuant to
19 Maryland code state article -- state government article 1058(A)(4). Topic is economic
20 development assistance to two specific companies.

21
22 COUNCIL PRESIDENT ANDREWS:

23 OK, so, a motion for a closed session has been made by Councilmember Floreen.
24 Seconded by Councilmember Navarro. OK? Very good. All those in favor of going to
25 closed session at 1:00 -- or it might be shortly thereafter -- please raise your hand. And
26 that is unanimous, I think, right? Councilmember Elrich, were you voting for that? Yes. All
27 right. And then we are now gonna go up to meet with the Revenue Authority in the sixth
28 floor conference room over lunch. There is no public hearing this afternoon, so we will not
29 be coming back here as the Council, but PHED committee will come back here -- upstairs
30 -- 2:00, OK. And then tonight we'll be in this room at 7:30 for the first evening of the public
31 hearing on the White Flint Sector Plan. So, next stop is the Revenue Authority, sixth floor,
32 conference room. Thank you, all.

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